

Date

AFT Teacher Leaders Program Participant Application SY24



I. Pr	rofessional Information
Name	
School Nam	ne
School Add	ress
School Zip	Code
School Phon	ne
Work Email	l Address
II. Pe	ersonal Information
Home Addr	ress
Home Zip C	Code
Home Phon	le <u> </u>
Cell Phone	
Personal En	nail Address
III. Ed	ducational Experience
What subjec	cts do you teach? / In what areas do you work?
How many	years have you been in education?
What was y	our preparation for becoming an educator?
How have v	ou continued your professional development?
j	
Please list a	ny professional organizations of which you are a member:
Please lis	st your areas of interest in education and education policy:
IV	V. Commitments
	hecking these boxes below, you agree to the following commitments.
By CI	iceking these boxes below, you agree to the following commitments.
□ I ·	will be available by email on a regular basis.
□ I v	will attend all full-day Saturday meetings: list dates
	will be prepared to discuss any assigned readings related to education blicymaking.
□ I v V.	will participate in conducting research and other documentation. Essay
in an init	rite a short essay (approximately 500 words) describing your participation tiative that was designed to produce positive classroom or school change. If about your role. (Attachment required)
T 7 T	Decommendations
VI. Please a	Recommendations attach two letters of support. Appropriate references would be from your
	al, chapter chair, colleague, student, parent, or other individual who can
	your leadership abilities and school improvement efforts.
How did	d you hear about this program?
Applica	nt's Signature