

**Summer Academy 2009
Teacher Application**

Name _____ School Year Position/Site _____

Have you taught Summer Academy or ESY before? Yes _____ No _____

If yes, how many years have you previously taught Academy: (2 years or less) (3-5 years) (6+ years)
Please circle

What classes did you teach? _____

of Years Teaching _____ Email _____ Employee ID # _____

Home # _____ Work # _____ Cell # _____

- The following opportunities are available. Please indicate interest in rank order with 1 being your first choice. An example is below. We will make every attempt to accommodate your choices of locations and courses; however, we ask that you remain flexible while we do our best to match your abilities to the needs of the students and the program as a whole.

Summer Academy – Elementary ___ Monte Vista ___ Mariposa

Summer Academy – Middle School ___ Pueblo

- Complete the Course Identification Sheet to indicate interest in specific curriculum areas.
- Return the application and Course Identification Sheet to Summer Academy #14 by **2/27**. Please call (480) 783-4085 with questions or email jhargreaves@kyrene.org.

Example:

Summer Academy – Elementary 2 Monte Vista 3 Mariposa

Summer Academy – Middle School 1 Pueblo