

Math-Ese 3-D Workshop Application
 OPSU, Summer 2008

Personal Information

Name _____

Home Address _____

Home Phone _____ E-mail address(s) _____

School Information

This information pertains to the school under which you will be contracted for the 08 - 09 school year.

School Name _____ (public, private)
(Circle the one that applies)

District _____ County _____

Building Principal _____ Superintendent _____

School Address _____

School Phone Number _____ School FAX Number _____

Mathematical Data

I will teach the following grade(s): K , 1 , 2 , 3 , 4 , 5 , 6 , 7 , 8 , 9 , 10 , 11 , 12
(Circle all that apply)

For non-elementary teachers; The math subjects that I teach are

_____, _____, _____, _____, _____

I spend _____ percent of my school week teaching math.	I will teach math to _____ students per day. <small>Give a number</small>
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I have access to the following items for use in my classroom: (Check all that apply – Items below are for informational purposes only)

___ computer	___ printer	___ internet access	___ VCR/DVD
___ television	___ overhead projector	___ optical projector	___ SmartBoard©
___ current membership to NCTM		___ other professional organization, List:	
___ classroom set of calculators list type:		___ graphing calculator accessories (List):	
___ manipulatives for teaching math concepts		___ other please explain:	

(Continued on back)

In 50 words or less, explain your level of expertise with real world math, the skills you expect to gain by attending this workshop, and how you will apply those skills in your classroom.

If selected as a participant, I agree to take part in all activities, attend all meetings, and complete all requirements. I understand that payment of my stipend is contingent upon my satisfactory completion of activities and assignments and my presence at all meetings.

Applicant Signature

Date

I recommend this teacher for participation in the Math-Ese 3-D workshop. I encourage the professional development opportunity and support the attendance at the workshop and all follow-up activities.

Building Principal Signature

Date

Send completed application to:
Oklahoma Panhandle State University, School of Education
Math-Ese 3-D Workshop
P.O. Box 430
Goodwell, OK 73939
Phone: 580-349-1406

**Applications must be received by
April 2, 2008**