

Teacher Academy

Preparing young people for a career in education

A Traverse Bay Area Intermediate School District program

Program Application

Part I. Personal Information

Last Name _____ First _____ Middle Initial _____

Mailing Address _____

City _____ Zip _____ Home Phone _____

Social Security No. _____ Birthdate _____ Sex M F

School District _____

Have you ever been convicted of a felony? _____

Part II. Resume (Please attach a copy of your current resume.)

Part III. Transcript (Please attach a copy of your official transcript.)

Part IV. Recommendations Students must attach two letters of recommendation. (Only one can be from an academic contact and none from a relative.) People writing letters must have known the student for at least two years.

Part V. Essay Why are you considering a career in education, and what do you hope to gain from participation in this program?

Part VI. Consent

I understand and accept the commitment I will be making by enrolling in the Teacher Academy.

Student

Signature _____ Date _____

Parent/Guardian

Signature _____ Date _____

Send this completed form, letters of recommendation, transcript, resume and essay to:

Susan O'Connor
Teacher Academy Coordinator
TBAISD Career-Tech Center
880 Parsons Road
Traverse City, MI 49686



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