

# University of Wisconsin- La Crosse School of Education Arizona Cultural Teaching Experience Application

Please submit application to the Office of Field Experience, 145 Graff Main Hall on October 14 or 15.

Name:	Student ID Number	<b>Arizona Cultural Teaching Experience</b>  <b>Service in the Schools</b>  <b>Fowler School District</b>  <b>Phoenix, Arizona</b>  <b>January 9-16, 2010</b>  <b>Applications can be turned in between Wednesday, October 14<sup>th</sup> at 7:45 a.m. – Thursday, October 15<sup>th</sup> until 4:00 p.m.</b>
Gender:	Date of Birth:	
School Address:		
Telephone:		
Email Address:		
Permanent Home Address:		
Telephone:		
Major/Minor/Certification Area:	Current Class Standing: ___ Sophomore ___ Junior ___ Senior	
Cumulative GPA:	Completed or currently enrolled in a field experience? ___ Yes ___ No	
Expected Month/Year of Student Teaching:		

**\*On a separate sheet of paper, please describe why you want to participate in this experience and what you hope to learn. Please limit your response to one page, typed and double-spaced.**

- I understand that I will be notified of acceptance to the program by Tuesday, October 20<sup>th</sup> and a \$100 deposit will be needed to reserve a spot by **Friday, October 23<sup>rd</sup>**.*
- I understand that I must pay the first installment of \$300 to confirm my participation in the program by **November 9**.*
- I understand the final installment of \$275 is due by **December 1<sup>st</sup>**.*
- I understand that I will NOT be refunded either the application fee or the confirmation deposit if I withdraw from the program. I understand that I will also be charged for any additional costs that have been expended or committed on my behalf that cannot be recovered. I understand that withdrawals must be made in writing to the School of Education.*

Signature of Applicant

Date

