

### PERSONAL DATA

|                                |           |           |                                     |                 |
|--------------------------------|-----------|-----------|-------------------------------------|-----------------|
| <b>MS OR MRS</b>               | <b>MR</b> | <b>DR</b> | <b>HOME ADDRESS</b>                 |                 |
| <b>FIRST NAME</b>              |           |           | <b>CITY</b>                         |                 |
| <b>LAST NAME</b>               |           |           | <b>STATE</b>                        | <b>ZIP CODE</b> |
| <b>HOME PHONE</b>              |           |           | <b>FIELD(S) OF CERTIFICATION</b>    |                 |
| <b>PREFERRED EMAIL ADDRESS</b> |           |           | <b>YEARS OF TEACHING EXPERIENCE</b> |                 |

### SCHOOL CONTACT INFORMATION

|                    |                       |                 |  |
|--------------------|-----------------------|-----------------|--|
| <b>SCHOOL NAME</b> | <b>SCHOOL ADDRESS</b> |                 |  |
| <b>PHONE</b>       | <b>CITY</b>           |                 |  |
| <b>FAX</b>         | <b>STATE</b>          | <b>ZIP CODE</b> |  |

### SCHOOL DEMOGRAPHICS

|  |                                    |  |   |                                 |                              |
|--|------------------------------------|--|---|---------------------------------|------------------------------|
| <b>TYPE OF COMMUNITY (MARK ONE)</b>        |                                    | <b>GRADE LEVELS YOU TEACH (MARK ALL THAT APPLY)</b>  |   |                                 |                              |
| URBAN                                      | RURAL                              | 4  | 5   | 6                               | 7                            |
| SUBURBAN                                   | TRIBAL                             | 8  | 9   | 10                              |                              |
| <b>SUBJECTS YOU ARE CURRENTLY TEACHING</b> |                                    | <b>SCHOOL POPULATION DIVERSITY (TOTAL 100%)<br/>(Fill in percentages below – replace zeroes)</b> |   |                                 |                              |
| <b>MORE DEMOGRAPHICS</b>                   |                                    | % AM.<br>INDIAN OR<br>ALASKA<br>NATIVE   | % NATIVE<br>HAWAIIAN<br>OR OTHER<br>PACIFIC<br>ISLANDER | % AFRICAN<br>AMERICAN/<br>BLACK |                              |
| AVERAGE<br>NUMBER OF<br>STUDENTS/<br>CLASS | % ENGLISH AS<br>SECOND<br>LANGUAGE | % FREE/<br>REDUCED<br>LUNCH  | % ASIAN   | % WHITE                         | % HISPANIC<br>OR<br>LATINO/A |

### OPTIONAL DIVERSITY INFORMATION

|                         |                                |                              |   |   |                               |
|-------------------------|--------------------------------|------------------------------|---|---|-------------------------------|
| <b>YOUR ETHNICITY</b>   |                                |                              | <b>NOTE: DIVERSITY DATA ARE REPORTED TO FUNDERS</b> |   |                               |
|                         |                                |                              | <b>YOUR RACE (HOW YOU CONSIDER YOURSELF)</b>        |   |                               |
| HISPANIC<br>OR LATINO/A | NOT<br>HISPANIC<br>OR LATINO/A | DO NOT<br>WISH<br>TO PROVIDE | AMERICAN<br>INDIAN OR<br>ALASKA<br>NATIVE           | NATIVE<br>HAWAIIAN<br>OR OTHER<br>PACIFIC<br>ISLANDER | AFRICAN<br>AMERICAN/<br>BLACK |
|                         |                                |                              | ASIAN   | WHITE   |                               |

**WORKSHOP: Shipboard and Shoreline Science on the R/V Lake Guardian**

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**APPLICANT NAME**

**FIRST NAME**

**LAST NAME**

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**WORKSHOP LOCATION**

**Lake Michigan: July 6 - 12, 2010**

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**GUIDELINES**

**Letter of Recommendation**

Please attach or send separately via email a letter of recommendation from your principal or another administrator in your school or district who is familiar with your teaching and previous professional development participation.

**Personal Statement / Supporting Documentation**

Please attach a personal statement. Describe why you feel this program would benefit you as a professional. Include your understanding of the importance of the Great Lakes, your experience teaching science, and your experiences using data and technology in class. Describe how you have integrated curriculum topics in instruction, and how you have incorporated the study of oceans and Great Lakes. Characterize your use of the Internet in your teaching practices. **Please limit your response to two typed pages, maximum.**

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**AGREEMENT**

I have reviewed the requirements and description of the Shipboard and Shoreline Science workshop aboard the *R/V Lake Guardian* offered by COSEE Great Lakes. I certify the information provided in my application is true to the best of knowledge.

**FULL NAME OF APPLICANT (First MI Last)**

**DATE (MM/DD/YY)**

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**APPLICATION PACKET CHECKLIST**

COSEE Great Lakes **Standard Workshop Application** Form Completed

Letter of Recommendation Sent via Email. If Not, Explain.

Personal Statement/Supporting Documentation Sent via Email

Agreement "Signed"

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