Application Form

ATE Workshops for Physics Faculty*
A Project of Lee College (TX), Estrella Mountain Community College (AZ), and the National Science Foundation**

Participant Notification Dates: The notification date of selected participants is at least 30 days prior to workshop.

Apply early since participant selections may be made earlier for well-qualified applicants.

Apply by:
Fax 281-425-6846
Mail ATE Workshops for Physics Faculty
Physical Sciences
Lee College
P. O. Box 818
Baytown, TX 77522-0818

Workshops/Conferences:

☐ November 15-17, 2012 Laboratory Tools for Introductory Physics Workshop (LTIP) at Lee College, Baytown, TX

☐ April 11-13, 2013 Instructional Strategies for Introductory Physics Workshop (ISIP) at Fox Valley Technical College, Appleton, WI

Site, type, and year of most recently attended TYC/HS Physics Workshop(s) or relevant AAPT/PTRA workshops:

Site: ___________________________ Type: ____________________________ Year: _____
Site: ___________________________ Type: ____________________________ Year: _____

(Please print clearly or type all information)

1. Name
   (______)________________________________________________________________________________
   Title Last First Middle Initial Preferred First Name

Are you a member of a “team” applying for this workshop? No _____ Yes ______
Who is (are) the other member(s) of the team?
Name: ____________________________________________ Institution ____________________________
Name: ____________________________________________ Institution ____________________________

2. Institution Name ________________________________________________________________
   Institution Mailing Address ________________________________________________________
   ______________________________________________________
   City __________________ State ___ ZIP ______
   Institution Phone (______)__________________________ ext ____________
   Fax (______)__________________________ e-mail(work)______________________________

* For more information call (281) 425-6522, email tokuma@lee.edu, or check http://www.physicsworkshops.org.
** NSF grant # 1003633 from the Division of Undergraduate Education of the Advanced Technological Education Program
3. Home Mailing Address

_________________________________________________

City ______________________ State _______ ZIP _______

Home Phone (______)________________ e-mail (home) ____________________________

4. Racial/Ethnic Background: White/not Hispanic______ Black______ American Indian______

Hispanic______ Asian______ No Disclosure______

5. Sex _____ M _____ F

6. Are you a citizen of the USA? Yes____ No____ If no, what country are you a citizen of? ________________

If you are in the USA on a permanent visa, give visa number__________________________________________

7. Number of years of full-time teaching at current institution _________ and any previous institutions _________

8. Number of physics semester contact hours/credit hours taught last year:

(include evening, overloads, summer) _______hrs Percent of Load ______% 

9. Estimate the percentage of students who are technological/technical students in

your physics classes ______% in all your classes ______% at your institution ______ %

List typical programs of study:

10. Highest Degree Earned ________________ Major ________________________________________________

Name and Location of this Institution ____________________________________________________________

11. Number and type of computers used in physics:

_________________________________________________________________________________________

12. Statement of interest and expected impact for each workshop (may include separate pages for each workshop):***

*** Mail Applications to: ATE Workshops for Physics Faculty, Physical Sciences, Lee College, P. O. Box 818, Baytown, TX 77522-0818 (or Fax 281-425-6846)
Institution’s Administrator Support

2010-2014 ATE Workshops for Physics Faculty
A Project of Lee College (TX), Estrella Mountain Community College (AZ), and the National Science Foundation

________________________of our institution is applying to participate in your ATE Workshops for Physics Faculty.

(applicant's name)  Faculty.

Our institution encourages and supports our applicant's participation in these workshops. Our applicant is currently teaching full-time with a teaching load of at least one course in physics. In addition, we expect to assign our applicant to teach physics each semester during the next two academic years. If selected, we would support efforts by our applicant to implement the workshop materials and concepts.

Also, if our applicant were to be selected as a participant, we would make it possible for the applicant to attend and participate in the workshop. The institution will provide some support for travel to attend the workshop in addition to providing the necessary substitutes and released time for our participant. (You may also attach an optional additional statement of institutional support.)

Administrator's Signature  ________________________________  Date________________

Administrator’s Name (Printed)  ______________________________________

Title/Position  ______________________________________

Telephone Number  (_______)____________________________ ext. ___________

Institution size (headcount) ____________________________________________

Nature of institution (rural, large city, etc.) ______________________________

Type of students  _____% women  _____% minorities  _____% disabled

Technological /Technical Programs at your college/high school:

_______ # of programs  _______ % students

List major Technological /Technical programs that include physics:

Additional comments: