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 3-5, 2011 Instructional Strategies for Introductory Physics Workshop (ISIP) at Austin Community College, Austin, TX

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)

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: