

HOLOCAUST STUDIES SUMMER INSTITUTE
JUNE 11-14, 2019 (no weekend classes) Application Deadline: Rolling till capacity reached
COMPLETE THIS FORM ONLY IF YOU ARE NOT SIGNING UP ON THE
M-DCPS Professional Development WEBSITE

Open to teachers grades 4-12
Social Studies and Language Arts teachers; Library Media Specialists;
Adult Vocational and Life Skills teachers

Circle where appropriate. Please PRINT all information legibly or your application will not be considered. Please complete the application and scan or fax to alissa.stein@gmail.com /305-532-2009

1. Ms. Mr. Other Title _____

2. Name: _____
Last Name First Name Middle

3. **Current HOME Address for mail delivery: (NOT your school address)**

_____ Street and Number City State Zip

4. Home Phone _____ Cell Phone _____ E-mail: _____

5. How many years have you been in the teaching profession? _____

6. Name of School you are presently assigned _____ Position _____

7. Current teaching assignment (grade & subjects) _____

8. How long have you taught at this school? _____ And in Miami-Dade County Public Schools? _____

9. Have you ever attended any other Holocaust institute before? (Admission criteria is not based on any current knowledge or background in teaching the Holocaust.) YES _____ NO _____ Which Institute?

10. Have you ever attended this institute before? YES ___ NO ___ If "yes" which year?

11. List any classroom, school-wide or community activities in which you have participated related to Holocaust Studies:
(Again this is not criteria for admission so please feel free to say if you have had little or no experience with Holocaust education)

1. _____

2. _____

12. Give at least 3 reasons why you want to participate in this Holocaust Institute:

1. _____

2. _____

3. _____

INTERNAL USE:

_____ date received _____

acc not acc alt

Application deadline: ASAP
Scan or Fax completed application to:
alissa.stein@gmail.com /305-532-2009
Alissa Stein, UM Consultant to Project