

**2009 – 2010 VERMONT SCIENCE INITIATIVE
Individual Course Application & Teacher Data Form for Tier I and
Leadership Academy Courses**

Please fill out the following and return to Cathy Higley, The Graduate Office, Johnson State College, 337 College Hill, Johnson, VT 05656

Name of VSI Course _____ **Location** _____

Your Name: _____

Grade Level/ Position: _____

Preferred Email Address: _____

School Telephone: _____ Home Telephone: _____

Fax number: _____

School: _____

School Address: _____

Home Address: _____

Area of Licensure _____

SS# if first time registering with JSC, otherwise College ID # _____

Date of Birth _____

of students taught this school year: a) _____ Elementary, b) _____ Middle, c) _____ High School

Indicate all that are applicable to you for the **2009-10** school year:

	Elementary school	Middle school	High school
Grade Level teaching			
Gifted and Talented teacher			
Special Education teacher			
Teacher of English language learners			
Title I teacher			
Non-teaching math teacher coach			
Non-teaching science teacher coach			
Paraprofessional			
Other (describe your position)			

Undergraduate and Graduate Degrees _____

I understand the cost for this course (09-10) is \$416/ credit (3 credits = \$1248)

Check is enclosed **Please bill me at my _____ address.**

Signature of Applicant

Date