



ELL TRAINER OF TRAINERS CADRE APPLICATION 2008-2009

PART A: APPLICANT INFORMATION

Applicant's Name: _____

Building: _____ Work Phone Number: _____

Building Address: _____

Work E-mail Address: _____ Summer E-mail Address: _____

Home Address: _____ Home Phone: _____

School District: _____ Telephone: _____

School District Contact's Name: _____ Position: _____

School District Address: _____

PLEASE PROVIDE TEACHER/PARTNER NAME: _____

If selected to participate in the ELL Trainer of Trainers Cadre Program, the two teachers (team) will attend all the training sessions provided by the Educational Service District 105/ Migrant Education Regional Office and commit to share their learning experiences in their school building, district, regional and/or state workshops.

Applicant Signature

CHECKLIST

Prior to submitting the application packet, verify that the following items are included by placing an "X" in the appropriate place. Packet need to include separate applications from BOTH teachers applying to be part of the cadre.

- _____ **Part A** Applicant Information
- _____ **Part B** Teacher Questionnaire (by applicant)
- _____ **Part C** Professional Reference Forms - (minimum of two)
One required from School Principal;
- _____ **Part D** School District Commitment Form needs **all** signatures.

PART B – TEACHER QUESTIONNAIRE

Grade Level: _____ Approximate number of Migrant student in your classes: _____

Responsibilities:

How will the Migrant students you teach benefit from your participation at the ELL Trainer of Trainers Cadre Program? (10 Points)

Why do you want to attend and what do you hope to gain from participating in the ELL Trainer of Trainers Cadre Program? (10 Points)

How will you disseminate what you have learned in this program to other teachers in your district, region and/or state? (10 Points)

2008-2009 ELL Trainer of Trainers Cadre Program

Dear Superintendent, Federal Programs Director and School Principal:

The Washington State Migrant Education Program is accepting applications from teachers of migrant and English Language Learner students to participate in the Trainer of Trainers Cadre Program administered by the Educational Service District 105/ Migrant Education Regional Office. The program utilizes the research-based instructional strategies outlined in the Sheltered Instruction Observation Protocol (SIOP) and the Project Guided Language Acquisition by Design (Project GLAD) models. Thomas Romero, Director of the Migrant Education Regional Office and Dora DeWitt, Migrant Literacy Coordinator are coordinating the program.

Applicants who participate in this program will be able to become ELL Trainer of Trainers. Teachers who are well versed in the SIOP and Project GLAD models and the ELD Standards will be able to develop consistency across the region in meeting the academic needs of migrant and ELL students.

Complete and place the enclosed “PART C-PROFESSIONAL REFERENCE FORM” *in a sealed envelope* and return it to the applicant to be included with his/her application.

If you have any questions, please contact Thomas Romero at (509)454-2854,
email: thomasr@esd105.wednet.edu and/or Dora DeWitt at (509)454-2856,
email: dorad@esd105.wednet.edu

Deadline to submit applications: **SEPTEMBER 19, 2008 BY 12:00 PM**

PART C – THE PROFESSIONAL REFERENCE FORM

TEACHER APPLICATION FOR 2008-2009 ELL TRAINER OF TRAINERS CADRE PROGRAM

Name of Applicant: _____

School Name: _____

School Address: _____

Work Phone Number: _____ E-mail Address: _____

| Please rate the applicant in each of the following categories in comparison with others individuals of similar training and experience. | Upper 10% | Upper 25% but Not Upper 10% | Upper 50% but Not Upper 25% | Lowest 50% but Not Lowest 10% | Lowest 10% | No basis For Judgment |
|---|--------------|--------------------------------------|--------------------------------------|--|---------------|-----------------------------|
| Holds high expectations for and communicates those expectations to all students. | | | | | | |
| Has a process for regular feedback and reinforcement of student progress. | | | | | | |
| Uses appropriate, research-based, instructional materials. | | | | | | |
| Aligns instruction with state standards. | | | | | | |
| Uses varied teaching strategies. | | | | | | |
| Uses appropriate assessment practices that show measurable progress. | | | | | | |
| Coordinates with other programs/departments/staff. | | | | | | |
| Remains current on educational pedagogy. | | | | | | |
| Develops and/or forms collaborative partnerships with parents, teachers, and community organizations. | | | | | | |

Comments on applicant's strengths/weaknesses:

Superintendent/Federal Projects Director/Principal Signature

Thank you for assisting us in evaluating this applicant

PART D – SCHOOL DISTRICT COMMITMENT FORM

It is the responsibility of the two team/teachers to commit to attend all levels of the training sessions and share their learning experiences in their school buildings, district, and region. If the agreement is not fulfilled, the district may be required to pay the ESD 105/Migrant Education Regional Office the full cost of the training.

The ***Migrant Education Program*** will pay three-quarters of the training cost for two teachers and will provide all the training materials as necessary.

The ***School District will be responsible*** to pay one-quarter of the training cost and will be responsible for substitute staff expenses and travel cost to and from each session. (suggested funding sources: Title I, II, & III; Migrant/Bilingual; LAP)

School Superintendent

Date

Federal Projects Director

Date

Building Principal

Date

Thomas Romero, Director MERO 105

Date