

Peconic Teacher Center Teacher As Reader Application

The group's facilitator must complete one application for the group. Separate applications for each member are not necessary. Please send this completed application to the Peconic Teacher Center. The Teacher As Reader is subject to approval from Peconic Teacher Center. The facilitator will receive written confirmation on the proposal's status.

Name of Participants:

The recommended participation is at least fi	ive (5) members and not more than ten (10) including the facilitator.
1	6
2	7
3	8
4	9
5	10
Name of Facilitator:	Date of Application:
Title of Teacher As Reader:	
School Building:	
School Telephone Number:	Home Telephone Number:
Dates:(Dates and time must equal 15 h	Times:
	grounds form for the location. Please forward a copy to Peconic Teacher Center)
Title of Teacher As Reader:	
Statement of Purpose: Please state the theme, areas of instruction of	or curriculum to be examined and desired outcomes to be achieved.
Resources: (i.e. books, journals, speaker, clerical suppo	ort)

Revised 7/15/09