

## L.I.F.T.S. Instructor Application 2012

**\*\* We are not currently in need of instructors, however, please fill out the application. We will review it, keep it on file, and contact you if a vacancy occurs. Thank you.\*\***

(August 6-17, 2012 M-F)

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

**TITLE** of proposed class \_\_\_\_\_ (as you would like it to appear on Student Registration Form-should sound attractive to the age group you propose to teach)

COURSE DESCRIPTION (be brief, you'll have the opportunity to provide more detail later) \_\_\_\_\_

GRADE LEVEL YOU WOULD LIKE TO TEACH (circle 3 and *rank* your choices)

K-1

1-2

2-3

3-4

4-5

5-6

1. WILL YOU BE AVAILABLE FOR OPEN HOUSE (Friday evening, August 17th)? \_\_\_\_\_
2. WHAT SIZE CLASS WOULD YOU PREFER (We need 10 students for the class to run)? \_\_\_\_\_
3. WHAT SPECIAL MATERIALS WILL YOU REQUIRE FOR THE CLASS? (Please provide an estimated range and a materials list, ALL expenses must be approved for reimbursement. Please keep our very limited funds in mind.) \_\_\_\_\_
4. PREVIOUS EXPERIENCE IN YOUR TOPIC AREA - practical (hobby, career) or formal (classes taken, degrees received) \_\_\_\_\_  
\_\_\_\_\_

5. WHY WOULD YOU LIKE TO TEACH THIS COURSE FOR L.I.F.T.S.? \_\_\_\_\_  
\_\_\_\_\_

6. DO YOU HAVE PRESCHOOL CHILDREN WHO REQUIRE CARE WHILE YOU ARE TEACHING? AGES? \_\_\_\_\_

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\*PLEASE RETURN VIA EMAIL TO [LIFTSPROGRAM@GMAIL.COM](mailto:LIFTSPROGRAM@GMAIL.COM) or MAIL TO:  
G.C.S. ATTN: L.I.F.T.S./ Beth Trabka-Kuzmich, 10 Gray Avenue, Greenwich, NY 12834 **BY FEBRUARY 10, 2012. THANK YOU!**

Equal Opportunity Employer.