

Application 2010-2011

APPLICATION DEADLINE: October 25, 2010

Please mail completed application to:

LAPDA
250 Main Street Suite 202
Montpelier, VT 05602

Teacher Leader Name: _____

School: _____

School or District Address: _____

Email: _____ Phone: _____

Administrator supporting teacher leader: _____

Principal/Curriculum Coordinator's Work Phone: Email: _____

Administrative Agreement

I attest that the person identified to participate in the **LAPDA Mathematics Leadership Support System K-8 (MLSS)** has shown or has the potential to effectively support other teachers in instructional improvement in mathematics.

I agree to provide _____ the necessary time and supports to fulfill obligations of this course: attend the 7 seminars, observe an existing lesson study model (1 day), and implement lesson study in their school (2 days) for both teacher leaders and the grade level team.

I also agree that I will attend the January 11, 2011 session with my Teacher Leader and agree to pay LAPDA \$2175 to cover the cost of this training program.

Administrator Signature

Date

Teacher Leader Agreement

I agree to attend the 7 seminars, observe an existing lesson study model, implement lesson study in my school with at least 2 teachers, and complete course readings and assignments.

Teacher Leader Signature

Date

Teacher Leader Background Questionnaire

The purpose of this questionnaire is to provide the LAPDA instructors with information to guide their planning.

Name _____ School _____

Mailing Address: _____

Phone (Home): _____ Phone (work): _____

Email: _____

Current Role in School

Math teacher leader (works with adults only) Number of years in position: _____

Intervention specialist (works with students providing additional instructional support) Number of years in position: _____

Math teacher leader and interventionist (works with students and adults)
Number of years in position: _____

Classroom teacher Number of years in position: _____

Other _____ Number of years in position: _____

Grade levels with which you work: (check all that apply)

K 1 2 3 4 5 6 7 8

Mathematics Program (s) used in school/district: (check all that applies)

Investigations: K 1 2 3 4 5
Adoption date: _____ # of years: _____

Bridges: K 1 2 3 4 5
Adoption date: _____ # of years: _____

Everyday Mathematics: K 1 2 3 4 5 6
Adoption date: _____ # of years: _____

MathLand K 1 2 3 4 5 6
Adoption date: _____ # of years: _____

Trail Blazers K 1 2 3 4 5 6
Adoption date: _____ # of years: _____

Connected Mathematics 5 6 7 8
Adoption date: _____ # of years: _____

MathThematics 5 6 7 8
Adoption date: _____ # of years: _____

MathScape 5 6 7 8
Adoption date: _____ # of years: _____

Addison Wesley: K 1 2 3 4 5 6 7 8
Adoption date: _____ # of years: _____

Math in Context 5 6 7 8
Adoption date: _____ # of years: _____

Other _____ K 1 2 3 4 5 6 7 8
Adoption date: _____ # of years: _____

Mathematics background (check all that apply)

- I have earned Less than 18 credits in mathematics
- I have earned more than 18 credits in mathematics, but I do not have a degree in mathematics
- VMI graduate
- Current student in VMI (First year Second year Third year)
- Undergraduate degree in mathematics
- Masters (or higher) in mathematics
- Other _____

Formative Assessment Experience and Training

- FAPP Date of Training _____
- OGAP Training
 - None
 - Fractions 2003 2004 2005 2006 2007 2008 2009
 - Multiplicative Reasoning 2003 2004 2005 2006 2007 2008 2009
 - Proportionality 2003 2004 2005 2006 2007 2008 2009
- Other _____ Date of Training _____

Other information helpful to the instructors:

A) Briefly describe strategies and tools that you use in your teacher leader role.

B) Briefly describe areas in which you would like help and support.

C) Please provide any other thoughts that will help the instructors understand your context and needs.

Thank you!