

## Trainee Teacher Nomination Form



**Fulbright Eğitim Komisyonu**

Şehit Ersan Caddesi No: 28-4

Çankaya, ANKARA 06680

Phone: (312) 428 4824 Fax: (312) 468 1560

e-mail: fulb-ank@tr.net

### To the Director of the Graduate School of Education and the Dean of the Faculty of Education

Please complete the summary form below with details of each person nominated, and ask nominated students to complete the attached application form. Return nomination and application forms to **Fulbright Commission** by **October 10, 2008**.

Director/Dean : .....

University : .....

E-mail : .....

Telephone : .....

Fax : .....

Name of student-teacher nominated : \_\_\_\_\_

Please circle: Program of study (1) : Masters-without-thesis program: **Biology, English, Mathematics**

OR Program of study (2) : Undergraduate 4-year program: **English**

When student began this program : \_\_\_\_\_

Letter of recommendation attached : Yes No

Name of student-teacher nominated : \_\_\_\_\_

Please circle: Program of study (1) : Masters-without-thesis program: **Biology, English, Mathematics**

OR Program of study (2) : Undergraduate 4-year program: **English**

When student began this program : \_\_\_\_\_

Letter of recommendation attached : Yes No

Name of student-teacher nominated : \_\_\_\_\_

Please circle: Program of study (1) : Masters-without-thesis program: **Biology, English, Mathematics**

OR Program of study (2) : Undergraduate 4-year program: **English**

When student began this program : \_\_\_\_\_

Letter of recommendation attached : Yes No

# Trainee Teacher Application Form



1. NAME: \_\_\_\_\_  
First Name Last Name

2. DATE of BIRTH: \_\_\_\_\_  
Day Month Year

3. PLACE OF BIRTH: \_\_\_\_\_

4. MAILING ADDRESS:

Attach a photograph here taken within the past six months

E-mail: \_\_\_\_\_@\_\_\_\_\_  
 Phone: ( ) \_\_\_\_\_  
 Cell phone: ( ) \_\_\_\_\_  
 Fax: ( ) \_\_\_\_\_

5. TEACHER EDUCATION PROGRAM: **Masters-without-thesis: Biology, English, Mathematics**  
*(Please circle)* OR **Undergraduate 4-year program: English**

University : \_\_\_\_\_

When started : \_\_\_\_\_

6. EDUCATION: List educational institutions attended

Name of institution & location <small>(List chronologically)</small>	Major field of study	Dates (Month & Year)		Actual name of degree or diploma	Date received or expected
		From	To		

7. CUMULATIVE UNDERGRADUATE GPA: \_\_\_\_\_

CURRENT GPA on Masters Program: \_\_\_\_\_

8. TEST SCORES

	Date taken	Score
KPDS		
UDS		
TOEFL		
Other: _____		

**9. STUDENT TEACHING EXPERIENCE:**

<b>Course</b>	<b>School</b>	<b>Number of days in schools</b>	<b>Number of classroom observations</b>	<b>Number of lessons taught</b>
School Experience 1				
School Experience 2				
Teaching Practice				

Other teaching experience (if any):

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**10. FOREIGN TRAVEL:** (Places, dates, purposes)

**12. STATEMENT OF PURPOSE:** State briefly what you feel you can offer to the internship, and what benefits you hope to gain

I am free to attend 3 briefing meetings: Yes No (please circle)

I certify that the information given in this application is complete and accurate to the best of my knowledge. I agree to comply with any necessary regulations and to return to Turkey upon the completion of my studies in the United States of America.

DATE: \_\_\_\_\_

SIGNATURE of APPLICANT: \_\_\_\_\_