



**CLASSROOM TEACHER  
EXCHANGE PROGRAM**

**INTERNATIONAL APPLICATION**

**2011-2012**

Funded by  
**The Bureau of Educational and Cultural Affairs of the U.S. Department of State**

Administered by  
**The Academy for Educational Development (AED)**

## APPLICATION INSTRUCTIONS

Please read this booklet carefully before completing the application. Be sure that you meet the eligibility requirements for the program as well as any specific requirements of the Fulbright Commission in your home country. Applications are not considered until all of the forms listed on the “Application Checklist” (p. iii) are completed properly and received by the Fulbright Classroom Teacher Exchange Program. **All forms and recommendations on the checklist must be submitted by the deadline set by the Fulbright Commission in your home country.**

### How to Submit:

Applicants should submit their Fulbright Classroom Teacher Exchange applications in two formats: as an electronic PDF file and as a hard copy of the application. First, **email** the completed electronic PDF application form (pp. A1 to A7) and support forms (pp. S1 to S6) to the Fulbright Commission in your home country. Second, applicants should **mail** a printed copy of the application to the Fulbright Commission. Be sure your hard copy includes pages A1 to A7 and S1 to S6, the essay (on p. A6), and all required signatures. Hard copies of reference forms should also be mailed by the applicant to the Fulbright Commission in your home country.

### Special Instructions:

#### J. William Fulbright Foreign Scholarship Form (p. A1)

This page, A1, follows the Application Checklist page. It must be completed and returned along with your application. This form is especially important as the Fulbright Scholarship Board (FSB) is the body that approves the award. This form **MUST** be filled out **COMPLETELY**. Please proofread the form carefully. Any forms with omissions and/or spelling errors will be returned to the applicant.

In section M, you should provide a brief description of what you expect to gain professionally and personally from participating in the Fulbright Classroom Teacher Exchange Program. Since this form will be forwarded to the FSB under separate cover and is distinct from the essay questions on page A6 of the application, *please do not make reference to other sections of your application.*

#### Application (pp. A2 to A7)

If additional space is needed, enter information in section XII, “Remarks,” or use additional sheets. Identify the item number to which the remark applies. Fill out the application forms completely and sign page A7 before you mail in a hard copy of the document; use additional sheets for continuation purposes only. **Do not simply say “see attached” or refer to your resume.**

#### I. “Applicant Basic Data” (p. A2)

For Question F, indicate the year(s) for which you previously applied for a Fulbright exchange and the length of the grant received.

#### II. “Application For...” (p. A2)

If you answer “Yes” to Question B you will be considered for a one-way assignment should a suitable assignment become available. One-way assignments are very rare and may be available depending on funding.

#### III. “Modern Language Proficiency” (p. A3)

Indicate your proficiency in all languages with which you are familiar. You may be screened for verbal proficiency in English.

#### V. “Present Employment” (p. A3)

The approving administrative official listed under Question E must be the same as the person completing the “Administrative Approval for Applicant” form (page R1).

#### VI. “Daily Schedule for Current Year” (p. A4)

To enable accurate matching, teachers are asked to describe fully their current teaching assignments. Please type this directly on the application, using an additional sheet for continuation purposes only.

#### X. “Accommodations” (p. A6)

Please answer all questions if you wish to exchange housing. **Note:** Housing is a private matter between grantees. Teachers are expected to locate suitable housing for their partner and vice-versa before going on exchange. The Fulbright program reserves the right to request termination of an exchange should housing issues significantly affect how the professional exchange is conducted. Any problems arising from a housing situation into which an individual grantee has entered are the responsibility of the grantee and not of the Fulbright program.

**School Support Form (pp. S1 to S4)**

Information about the applicant's school is critical to finding a suitable match. In addition, school support is essential to successful exchanges; the suitability of both the teacher and the school will be considered. This section should be filled out thoughtfully and completely with your school supervisor and/or administrator. The hard copy of this form must be signed by the applicant and by the school supervisor or administrator who assists in completing the form.

**Community Support Form (pp. S5 and S6)**

This form is to be completed by the applicant with members of the community who will assist in facilitating and supporting the exchange. Strong community support is essential to the success of the exchange. The incoming exchange teacher will need the assistance and generosity of members of the community to ensure a smooth transition. Friends, neighbors, and community organizations can assist in numerous small, but highly important ways. Community members interested in supporting an exchange teacher should sign the hard copy of this form.

**Approval and References (pp. R1 to R8)**

Pages R1 to R8 comprise four approval and reference forms. The applicant should complete Item 1 on each form and then give it to the appropriate colleague or official. The referee must fill out the form completely, and sign where indicated. Each form should be submitted in a separate envelope with the referee's signature across the flap on the back. All four envelopes should be submitted with the hard copy of your application.

**"Administrative Approval for Application" (pp. R1 and R2)**

The official who completes and signs the "Administrative Approval for Applicant" form must be the official authorized to approve participation in the exchange, grant a leave of absence, and approve the appropriate salary arrangements. Applicants are strongly encouraged to discuss their application to the program with their administrator in advance of applying and should be aware that their application will not be considered without receipt of this form.

**Reference Forms (pp. R3 to R8)**

The references should be completed and signed by individuals familiar with the applicant's professional work. One of these forms (the "Immediate Supervisor Reference for Applicant" form pp. R3 and R4) must be completed by the applicant's immediate supervisor or the person responsible for the applicant's formal evaluation. The supervisor must also provide a general description of the school and indicate the flexibility of the applicant's teaching schedule. The "Reference for Applicant" forms on pages R5-R8 are to be completed by an educator able to comment on the applicant's strengths and weaknesses. Referees should place the completed form in a sealed envelope signed across the back flap and clearly marked "Reference for (applicant's name)." *Sealed and signed references must be included with the hard copy of your application.* Applicants should not include performance evaluations with their applications. Other commendations and awards may be listed in section VII, Question E, on Page A4.

We prefer that the entire hard copy of the application (including application form, essay, support forms, and references) be submitted in one complete packet.

**Miscellaneous**

After the application has been submitted, applicants must inform the Fulbright Classroom Teacher Exchange Program in writing of:

- A change in employment or teaching assignment;
- a change of address, phone number, or email;
- a change of plans affecting the application;
- a desire to withdraw the application;
- an application to teach or study abroad under another program;
- a termination of teaching contract;
- a change in school administration.

## Application Checklist

Please complete this checklist and enclose it with your application package. Please do not staple any of your application pages (paper clips may be used), and submit all application materials in the order indicated on this checklist. Mail all application materials to the Fulbright Commission in your home country.

1. Does your package include:

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| a. Fulbright Foreign Scholarship Board form? (1 copy)                  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. original of the application? (1 copy)                               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. original of the essay? (1 copy)                                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. "School Support" form? (1 copy)                                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. "Community Support" form? (1 copy)                                  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| f. "Administrative Approval for Applicant" form?* (1 copy)             | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| g. "Immediate Supervisor Reference for Applicant" form?* (1 copy)      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| h. additional references?* (1 copy of each)                            | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| i. clear copy of the photo/data page of your current passport (1 copy) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

*[Please do not send resumes, teaching certificates, transcripts, audio or video tapes.]*

2. Are any of the above documents being sent under separate cover?  Yes  No  
If so, which ones?

3. Is your Administrative Approval completed by the school official authorized to grant the required salary and leave arrangements?  Yes  No

\*All reference forms submitted must include original signatures. The reference forms should be included with your application in sealed envelopes signed across the back flap. However, if a reference must be mailed under separate cover it must be also submitted by the deadline.





**J. William Fulbright Foreign Scholarship Board**  
**Fulbright Classroom Teacher Exchange Program**  
**2011-2012**

A. Applicant Name

Last:

First:

Middle:

Title:  Dr.  Mr.  Mrs.  Ms.  Miss

B. Country of Citizenship:

Country of Residence:

C. Home Telephone (area code, number):

D. Complete Home Mailing Address (include number, street, city, state/province, country, postal code):

E. Date of Birth (mm/dd/yyyy):

G. Indicate year and country of any previous Fulbright grants (if none, write 'none'):

F. Place of Birth (city, state, country):

H. Current Occupation

Name of employer:

Address of employer:

Job Title:

Employed Since (mm/yyyy):

I. Current Subject(s) and Level(s):

J. First Country Choice: USA

K. Education

Name of institution, university, or professional school and location:

Major field of study:

Name of degree and date received:

L. Name your most significant publications/honors/awards/projects or other accomplishments:

M. Provide a synopsis in approximately 50 words of your personal/professional goals as related to this exchange program. This explanation of your goals will be reviewed by the Fulbright Scholarship Board. (Please use only this space. Additional pages will not be accepted):

**FOR FSB USE ONLY:**  Approve  Disapprove  Abstain

FSB NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_





III. MODERN LANGUAGE PROFICIENCY												
Language	Listening Comprehension			Speaking Ability			Reading Ability			Writing Ability		
	Exc.	Good	Fair	Exc.	Good	Fair	Exc.	Good	Fair	Exc.	Good	Fair

**IV. EDUCATION AND PROFESSIONAL PREPARATION ABOVE SECONDARY SCHOOL (List degrees in chronological order)**

Institution	Dates Attended		Degrees Received		Major Subjects
	From	To	Kind	Date	

**V. PRESENT EMPLOYMENT**

A. Present Position Title:		Years at Present Position:
B. School Information		School website:
Name:		Telephone number:
Street Address:		Fax number:
City:	Country:	Postal Code:
C. School Principal or Headmaster		
Last Name:	First Name:	Title: <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss
School Principal's or Headmaster's Job Title:		School email:
		Telephone number:
D. Immediate Supervisor		
Last Name:	First Name:	Title: <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss
Immediate Supervisor's Job Title:		School email:
		Telephone number:
E. Approving Administrative Official (Note: Must be the official authorized to approve participation in the exchange, grant a leave of absence, and approve the appropriate salary arrangements, e.g., President, Headmaster, Superintendent. See "Administrative Approval for Applicant" form)		
Last Name:	First Name:	Title: <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss
Approving Administrative Official's Job Title:		School email:
		Telephone number:
Approving Administrative Official's Institution		
Name:		
Street Address:		
City:	Country:	Postal Code:

<b>VI. DAILY SCHEDULE FOR CURRENT YEAR</b>					
<b>A. Subjects:</b> Be specific and provide details (e.g., World History: European emphasis). Special Education teachers are requested to include details about student needs and teaching approaches.	Number of Teaching Hours Per Week	Grade Level and Age of Students		Number of Students	
		Grade	Age		
<b>B. Additional Activities:</b> Describe workload other than your teaching position (e.g., counseling, supervision, curriculum development, extra-curricular activities).	Number of Teaching Hours Per Week	Grade Level and Age of Students		Number of Students	
		Grade	Age		
<b>C. Are you a full-time teacher?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No					
<b>D. What is the best time to call you at school?</b>					
<b>E. Have you been absent more than six days per year in the last three years?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:					
<b>VII. PREVIOUS EXPERIENCE / EMPLOYMENT</b>					
<b>A. Number of years teaching experience (current and previous teaching positions combined):</b>					
<b>B. List any previous full-time teaching or administrative experience, beginning with the most recent:</b>					
Dates		Position Title	Employer's Name and Location	Full Time Teaching Position	
From	To			Grade	Subject
<b>C. List any experiences you have had studying, working or traveling abroad:</b>					
Dates		Country	Purpose of Visit		
From	To				
<b>D. List memberships in educational, professional, and civic associations:</b>					
<b>E. List awards and publications:</b>					

**VIII. OTHER EXPERIENCE**

A. List your hobbies and interests outside of teaching. Also list any extracurricular activities you can organize or direct at your host school (e.g., sports, arts, dramatics, music, etc.):

B. List educational experiences you have had which would be especially helpful to you in working abroad (e.g., working with bilingual students, student exchange programs, etc.):

C. List experiences you have had in teaching English to non-native speakers. This section is required if you are applying as an English or English as a Second Language (ESL) teacher.

**IX. U.S. GOVERNMENT EDUCATIONAL EXCHANGE GRANTS**

A. Have you ever received a U.S. Government educational exchange grant?  Yes  No  
If yes, please indicate the year, country, type of grant and sponsoring agency:

B. If you did not accept or complete the grant, explain briefly why:



**Certification**

I certify that the information provided in this application is, to the best of my knowledge, true and correct. I am aware that a false statement may be grounds for non-selection or termination of my exchange. I further certify that I have notified program authorities in my country of any misdemeanor (except minor traffic violation) or felony convictions or pending indictments.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

<b>How did you first hear about the Fulbright Classroom Teacher Exchange Program?</b>	
from a colleague at my school or college	through a professional journal or other publication
from a school or college administrator	at my local library
from a former participant of this program	through a mailing from the Fulbright program
from a friend	at the U.S. Embassy
at a conference	at the Fulbright Commission
from a website (please specify):	other (please specify):
_____	_____



**CLASSROOM TEACHER  
EXCHANGE PROGRAM**

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SCHOOL SUPPORT FORM  
AND  
COMMUNITY SUPPORT FORM  
**2010-2012**



### School Support Form

**IMPORTANT:** This form is to be completed by the applicant along with his/her school supervisor and/or administrator and other school leaders who will assist in facilitating and supporting the exchange. School support is critical to successful exchanges, so the suitability of both the teacher and the school will be considered when evaluating candidates.

Name of applicant:		Name of school:	
School address:		Name of school district:	
School telephone:		School website address:	
<b>A. DESCRIPTION OF SCHOOL</b>			
If school is primary or secondary, is it year-round? No <input type="checkbox"/> Yes <input type="checkbox"/>		Number of terms:	
School start date:		School end date:	
No. of school teaching staff:		No. of faculty in department:	
No. of students in institution:	School type: <input type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Religious <input type="checkbox"/> Other (please describe):		
Average class size:		School location: <input type="checkbox"/> Urban <input type="checkbox"/> Suburban <input type="checkbox"/> Rural	
Population of city/town/community surrounding school:		Percentage of students on free/reduced lunch:	
Ethnic/Racial make-up of the school:			
Notable programs administered at your school:			
Awards/Recognition received by your school in the past 10 years:			
Provide a brief description of the community surrounding the school:			



## Classroom Teacher Exchange Program

Briefly describe your current classes and the level (grade and ability) of your students.

### B. SUPPORT OF EXCHANGE

*The following questions are asked to determine your school's ability to facilitate and support a successful teacher exchange. The success of this program is dependent on the participation of the schools involved, not just the exchange teachers. Any school participating in the Fulbright program must understand that being a part of the Fulbright program is a distinction, but with the program comes a number of responsibilities for the administration, faculty members, and the broader school community.*

1. What steps will your school take to assist the incoming teacher to integrate into the school and community? Who will be responsible for this (this may be more than one person)?

2. How will your school provide ongoing support and professional development to the incoming exchange teacher to ensure he/she understands your school's procedures, the curriculum of his/her classes, recommended teaching methods and the overall school culture?

Can the incoming exchange teacher attend new teacher orientation?  Yes  No

If so, what are the dates? Start date(dd/mm/yyyy):

End Date(dd/mm/yyyy):

3. Will the incoming exchange teacher participate in any professional collaboration teams at your school (subject teams, grade level teams, etc.)? If so, what are they, who is involved and what will be the responsibilities of the incoming exchange teacher?



## Classroom Teacher Exchange Program

4. Will the incoming exchange teacher teach any classes that have national standardized tests? If so, what are they?

5. Would the incoming exchange teacher have to teach the exact course load the applicant currently teachers, or is your school able to be flexible in assigning the incoming exchange teacher's courses? If so, briefly describe.

6. How could you involve the exchange teacher in the broader activities of the school – clubs, sports, festivals? Would it be possible for the exchange teacher to sponsor/advise a club or coach a sport, if he/she is interested in doing so?

7. How will you notify students and parents of the incoming exchange teacher? Are there any parent or student groups – such as a parent-teacher association, student government or clubs – that could formally welcome the incoming exchange teacher to the school upon his/her arrival? What groups or organizations would invite the exchange teacher to participate in their activities?

8. What activities do you envision your school doing with your host school in the U.S. to promote cultural exchange between the students and faculty of the two schools? (for example, on-line projects between students, videoconferences, developing a sister city relationship, etc.)



## Classroom Teacher Exchange Program

9. Is there any other information relevant to your school's ability to facilitate and support the exchange?

10. Using a maximum of one page, provide a narrative description of your school, student body, and academic level and explain why your school would be a supportive venue for an exchange teacher to teach in, and how you envision your school would benefit from participation in the Fulbright exchange program. (If you need more space please use an additional sheet.)

Signature of Applicant:

Date:

Name of School Administrator:

Title:

Signature of School Administrator:

Date:

## Community Support Form

**IMPORTANT:** This form is to be completed by the applicant with members of the community who will assist in facilitating and supporting the exchange. Strong community support is essential to the success of the exchange. The incoming exchange teacher will need the assistance and generosity of members of the community to ensure a smooth transition into his/her exchange assignment. Friends, neighbors, and community organizations can assist in numerous small, but highly important ways. Please use this form to demonstrate community support for the exchange.

Name of Applicant:

Are there community members or organizations who can do any of the following to facilitate and support the exchange? (This includes civic organizations, school colleagues, neighbors, friends and relatives.) Place a check next to items with which they could assist.

- Assist with finding housing accommodations for the incoming exchange teacher, if you are not exchanging homes
- Assist with transportation needs (purchasing a car or assisting the incoming exchange teacher with getting around town if public transportation is not available)
- Assist with obtaining a drivers license and car insurance
- Assist with establishing a bank account (if necessary)
- Involve the incoming exchange teacher in community activities and/or festivals
- Invite the incoming exchange teacher to their home for "home hospitality" dinners or for other activities such as holiday celebrations
- Take the incoming exchange teacher to cultural events such as theatre, sports competitions, concerts, etc.
- Assist with finding appropriate health care needs, such as referring the incoming exchange teacher to a doctor, dentist, pharmacist or other needed care
- Assist with finding day care in the event the incoming exchange teacher has young children
- Assist with registering children at local schools if the incoming exchange teacher has school-age children
- Assist in helping the incoming exchange teacher's spouse or partner in finding productive activities (voluntary) to do in the community
- If applicable, assist the incoming exchange teacher in finding an institution for their religious needs (church, mosque, synagogue, etc.)
- Other (Please comment on any additional support for the exchange that will be offered by your community):

(Additional support from community, continued from previous page)

Please list the names and titles of community members and/or organizations who can support the exchange in terms of the items listed on the previous page. Please include their signatures to demonstrate that you have discussed the program with them and they are willing to become involved. Listing informal titles of individuals such as “neighbor,” “school parent” or “close friend” is acceptable. You may also list individuals with whom you work at your school if they will support the exchange in any of these ways.

Name (Individual and/or organization)	Title	Signature	Date



**CLASSROOM TEACHER  
EXCHANGE PROGRAM**

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APPROVAL AND REFERENCE FORMS

**2011-2012**

## Administrative Approval for Applicant

<p>1. Name of Applicant (last, first, middle):</p>
<p>2. <b>INSTRUCTIONS FOR APPROVING ADMINISTRATOR:</b> Please complete the following sections and sign this form to certify your approval or disapproval of the applicant's pursuit of a direct exchange opportunity through the Fulbright Classroom Teacher Exchange Program. Indicate the type of leave to be granted and whether or not your teacher has undergone a criminal background check. Return this completed form to the applicant in a sealed envelope. <b><i>We strongly encourage applicants and administrators to consult before completing this form.</i></b> (Please see the following page for more information about the program)</p>
<p><b>A. APPROVAL</b></p> <p><input type="checkbox"/> The above applicant is employed full-time by our school or school system. The applicant has, in my judgment, superior qualifications and will be an excellent representative of our education system in the U.S. If we and all other necessary parties agree to a proposed assignment, the following leave of absence will be approved and the applicant will be released under the conditions checked below in order to accept a grant under the Fulbright Classroom Teacher Exchange Program. Note that Fulbright teachers continue to receive their salary from their home school while on exchange, as their positions are filled by the incoming Fulbright exchange teachers at no cost to the school.</p> <p>According to institutional/district procedures, we conducted a criminal background check of the applicant at the time of his/her employment.   <input type="checkbox"/> Yes   <input type="checkbox"/> No</p>
<p><b>B. DISAPPROVAL</b></p> <p><input type="checkbox"/> The above teacher is employed by our school or school system and <b>will not</b> be granted a leave of absence.</p>
<p><b>C. OFFICIAL SIGNATURE</b></p> <p><b>Note:</b> This form must be completed and signed by the person (President, Headmaster, Superintendent, or District Official) who is officially authorized to approve participation in the exchange, grant a leave of absence, and approve the appropriate salary arrangements for the school or school system in which the applicant is employed.</p>
<p>Name and Job Title of Chief Administrator or Authorized Official (President, Headmaster, Superintendent or District Official):</p>
<p>Name and Address of School or School System (include number, street, city, state/province, country, and zip code):</p>
<p>Signature of Chief Administrator or Authorized Official (President, Headmaster, Superintendent or District Official):</p> <p>Print Name:</p> <p>Signature: <span style="float: right;">Date:</span></p>

## **About The Fulbright Classroom Teacher Exchange Program**

The purpose of the Fulbright Classroom Teacher Exchange Program is to help promote mutual understanding between the people of the United States and the people of other countries through educational exchange. Sponsored by the Bureau of Educational and Cultural Affairs, U.S. Department of State, the Program recognizes and encourages excellence in teaching in the U.S. and abroad. International teachers participating in the program have the opportunity to live and work in the United States by exchanging positions with educators from schools in the U.S.

Fulbright Classroom Exchange teachers exchange positions for a semester or an academic year. By living and working in the United States, they gain an understanding and appreciation of the similarities and the differences between nations. If your teacher is proposed for an exchange, you will have the opportunity to review the credentials of the U.S. teacher and to accept or reject the proposed exchange arrangement. In order for an exchange to take place it must be accepted by the U.S. teacher, the U.S. administrators, the international teacher, and the international administrators, and must be approved by the J. William Fulbright Foreign Scholarship Board (FSB). **At the time of this application your signature on the previous page simply enables your teacher to be eligible for the program and indicates your willingness to consider a Fulbright Teacher Exchange at your institution.**

The success of the Fulbright Teacher Classroom Exchange Program in increasing international understanding and properly representing the educational system and other aspects of life and culture in your country depends greatly upon the judgment exercised by school administrators in approving their teachers' participation in the program. It is important to the reputation of the program, as well as that of the participating school, that an applicant be approved for participation only if the approving official has no reservations about his or her character, reliability and adaptability, and judges him or her to have superior qualifications and to be an excellent representative of your country's education system.

Most exchanges occur with both U.S. teachers and international teachers receiving their regular salaries from their home schools while teaching and living abroad, though specific arrangements vary for each country. Housing arrangements are the responsibility of the teachers involved.

Both the U.S. and the international teacher will be provided with a limited medical insurance policy by the U.S. government.

## Immediate Supervisor Reference for Applicant

**IMPORTANT:** The success of this program depends on the selection of educators whose qualifications give promise of outstanding success under unfamiliar circumstances abroad. Please return this completed form to the applicant in a sealed envelope. For more information see the Fulbright Classroom Teacher Exchange Program description on the following page.

1. Name of Applicant (last, first, middle):				
2. Check the Applicant's professional qualifications and personal traits:				
Item	Superior	Above Average	Average	Below Average
<b>PROFESSIONAL QUALIFICATIONS</b>				
Knowledge of the subject field				
Effectiveness with students of diverse levels of preparation				
Ability to work with colleagues, including those with divergent views				
Ability to share teaching experience and knowledge with others				
<b>PERSONAL TRAITS</b>				
Adaptability				
Resourcefulness				
Self-reliance				
Initiative				
Professionalism				
Please type your responses to the following questions on a separate sheet of paper (200 words maximum per question).				
3. Please comment on the applicant's professional competence, experience, accomplishments, and personal qualities. Has the applicant received superior evaluations or awards for teaching and working in education?				
4. Indicate any limitations the candidate may have.				
5. How will your school or district benefit from the experience or knowledge gained by the applicant should he/she participate in the program?				
6. Number of years you have known applicant:			7. Is the applicant a full-time teacher?	
8. Please provide a general description of your teacher's home school. Use an additional page if necessary.				

9. Would the incoming U.S. teacher need to teach your teacher's exact course schedule or can this schedule be altered? Check all that apply:

- Must teach exact course schedule
- Certain classes may be changed to other classes within the department
- Certain classes may be changed to other classes outside the department
- Number of classes taught can be reduced

Comments:

10. Please describe any other special considerations that could be given to the incoming exchange teacher, (e.g., orientation, extra preparation periods, special assignments teaching about home country culture, special support staff to assist exchange teacher with instructional or related duties, other). If additional space is required, please continue on an additional sheet.

11. Name and Job Title (include Dr., Mr., Mrs., Ms., Miss):

12. Name and Address of School (include number, street, city, state/province, country, and postal code):

13. Print Name:

Signature:

Date:

#### **About The Fulbright Classroom Teacher Exchange Program**

The purpose of the Fulbright Classroom Teacher Exchange Program is to help promote mutual understanding between the people of the United States and the people of other countries through educational exchange. Sponsored by the Bureau of Educational and Cultural Affairs, U.S. Department of State, the Program recognizes and encourages excellence in teaching in the U.S. and abroad. International teachers participating in the program have the opportunity to live and work in the United States by exchanging positions with educators from schools in the U.S.

Fulbright Classroom Exchange teachers exchange positions for a semester or an academic year. By living and working in the United States, they gain an understanding and appreciation of the similarities and the differences between nations.

**Please return this form to the applicant prior to the deadline in a sealed envelope signed across the back flap and clearly marked "Reference for (applicant's name)"**



### Reference for Applicant

**IMPORTANT:** The success of this program depends on the selection of educators whose qualifications give promise of outstanding success under unfamiliar circumstances abroad. Return this completed form to the applicant so it can be submitted with the application. Please see the Fulbright Classroom Teacher Exchange Program description on the following page.

1. Name of Applicant (last, first, middle):				
2. Check the Applicant's professional qualifications and personal traits:				
Item	Superior	Above Average	Average	Below Average
<b>PROFESSIONAL QUALIFICATIONS</b>				
Knowledge of the subject field				
Effectiveness with students of diverse levels of preparation				
Ability to work with colleagues, including those with divergent views				
Ability to share teaching experience and knowledge with others				
<b>PERSONAL TRAITS</b>				
Adaptability				
Resourcefulness				
Self-reliance				
Initiative				
Professionalism				
Please type your responses to the following questions on a separate sheet of paper (200 words maximum per question).				
3. Please comment on the applicant's professional competence, experience, accomplishments, and personal qualities.				
4. Indicate any limitations the candidate may have.				
5. How will your school or district benefit from the experience or knowledge gained by the applicant should he/she participate in the program?				
6. Professional relationship to the applicant:			7. Number of years you have known the applicant:	
8. Name and Job Title (include Dr., Mr., Mrs., Ms., Miss):				
9. Professional Address (include institution, number, street, city, state/province, postal code, phone number and email address):				
10. Print Name:				
Signature:			Date:	

### **About The Fulbright Classroom Teacher Exchange Program**

The purpose of the Fulbright Classroom Teacher Exchange Program is to help promote mutual understanding between the people of the United States and the people of other countries through educational exchange. Sponsored by the Bureau of Educational and Cultural Affairs, U.S. Department of State, the Program recognizes and encourages excellence in teaching in the U.S. and abroad. International teachers participating in the program have the opportunity to live and work in the United States by exchanging positions with educators from schools in the U.S.

Fulbright Classroom Exchange teachers exchange positions for a semester or an academic year. By living and working in the United States, they gain an understanding and appreciation of the similarities and the differences between nations.

**Please return this form to the applicant prior to the deadline in a sealed envelope signed across the back flap and clearly marked "Reference for (applicant's name)"**

## Reference for Applicant

**IMPORTANT:** The success of this program depends on the selection of educators whose qualifications give promise of outstanding success under unfamiliar circumstances abroad. Return this completed form to the applicant so it can be submitted with the application. Please see the Fulbright Classroom Teacher Exchange Program description on the following page.

1. Name of Applicant (last, first, middle):				
2. Check the Applicant's professional qualifications and personal traits:				
Item	Superior	Above Average	Average	Below Average
<b>PROFESSIONAL QUALIFICATIONS</b>				
Knowledge of the subject field				
Effectiveness with students of diverse levels of preparation				
Ability to work with colleagues, including those with divergent views				
Ability to share teaching experience and knowledge with others				
<b>PERSONAL TRAITS</b>				
Adaptability				
Resourcefulness				
Self-reliance				
Initiative				
Professionalism				
Please type your responses to the following questions on a separate sheet of paper (200 words maximum per question).				
3. Please comment on the applicant's professional competence, experience, accomplishments, and personal qualities.				
4. Indicate any limitations the candidate may have.				
5. How will your school or district benefit from the experience or knowledge gained by the applicant should he/she participate in the program?				
6. Professional relationship to the applicant:			7. Number of years you have known the applicant:	
8. Name and Job Title (include Dr., Mr., Mrs., Ms., Miss):				
9. Professional Address (include institution, number, street, city, state/province, postal code, phone number and email address):				
10. Print Name:				
Signature:			Date:	

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