



**Instructor Application Form  
College in the Schools  
Central Lakes College**

**Part A: Teacher Information**

Name	
Home address	
City, State, ZIP	
Home/Cell phone	
Home e-mail	
School phone (your direct line)	
School e-mail	
Total number of years you have taught high school	
Specific subjects that you have taught that relate to the College subject for which you are applying	
Undergraduate degree(s) (example: BA)	
Undergraduate institution(s)	
Graduate degree(s) (example: MAT)	
Graduate institution(s)	
Other significant education	

**Part B: Application Information**

Academic year you intend to begin teaching the CIS course or subject you are applying to teach? (example: 2018-19)	
Are you applying to replace a teacher who is currently teaching the CIS course or subject you are applying to teach?	Yes <input type="radio"/> No <input type="radio"/>
If so, whom would you replace?	

Which course or subject are you applying to teach?

<b>English and Communications Studies</b>		<b>Social Sciences</b>	
<input type="checkbox"/> Composition I, II		<input type="checkbox"/> American Economy	
<input type="checkbox"/> Public Speaking		<input type="checkbox"/> History	
<input type="checkbox"/> Literature		<input type="checkbox"/> Sociology	
<input type="checkbox"/> Other _____		<input type="checkbox"/> Psychology	
		<input type="checkbox"/> Other _____	
<b>Mathematics</b>		<b>World Languages</b>	
<input type="checkbox"/> Calculus, Pre, I, II		<input type="checkbox"/> Spanish	<input type="checkbox"/> American Sign Language (ASL)
<input type="checkbox"/> Beginning College Algebra, College Algebra		<input type="checkbox"/> German	
<input type="checkbox"/> Other _____		<b>Art/Music</b>	
		<input type="checkbox"/> Jazz	
<b>Science</b>		<input type="checkbox"/> Band, Choir	
<input type="checkbox"/> Biology		<input type="checkbox"/> Art	
<input type="checkbox"/> Chemistry		<b>Technical Area</b>	
<input type="checkbox"/> Other _____		<input type="checkbox"/> List Program Area	
<b>Other Areas Not Listed Above</b>		<b>Other Areas Not Listed Above</b>	
<input type="checkbox"/> _____		<input type="checkbox"/> _____	
<input type="checkbox"/> _____		<input type="checkbox"/> _____	
<input type="checkbox"/> _____		<input type="checkbox"/> _____	

**Part D: District Information**

District name and number	
Address	
City, State, ZIP	
Phone	
FAX	
Superintendent's name	
Superintendent's e-mail	
Principal's name	
Principal's e-mail	
Counselor's name	
Counselor's e-mail	

**A complete College in the Schools application includes ALL of the following:**

- Instructor Application Form
- Letter of intent
- Resume
- Transcripts, Undergraduate and Graduate

<p><b>Return completed application to:</b>          Central Lakes College          College in the Schools          Attention: Nick Bickford          501 West College Drive          Brainerd, MN 56401</p>
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