Fermilab

Discovering the Nature of Nature

Teacher Research Associates at Fermilab
Application Form

Personal Information

Name______________________________ SS#____________________

Home Address:

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Phone______________________________ E-mail____________________

Citizenship______________________ Birthplace____________________

Date of Birth______________________

Please Return all Application Materials to:

Dr. Ron Ray
TRAC Program
Fermi National Accelerator Laboratory
MS 208
PO Box 500
Batavia, IL 60510

School/Teaching Information

Number of years of full-time teaching ______________________

School Name and Address (where presently teaching):

______________________ Principal ______________________

____

______________________ Phone ______________________

Teaching Assignments *this* school year:

Course Title	Grade Level	Periods per Day

Total number of students in your classes annually: ______________________

Do you consider your school ______ rural ______ Suburban
______ Urban(inner city) ______ Urban (but not inner city)

Educational Background

List colleges/universities where a formal degree was earned.

University	Degree(s) Earned	Major	Date

Have you worked previously at Fermilab? If so, give program, dates, and contacts at Fermilab.

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Describe the extent of your experience with scientific instruments, electronics instruments (e.g.: oscilloscopes, digital circuits, etc.) along with any other special work experience you may have (drafting, electronics design, etc.) which will assist the selection committee in placing you in a research setting.

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Describe the extent of your experience with computer operating systems, programming languages, software and hardware software. Experience is not required. This information will assist the selection committee in placing you in a research setting.

UNIX ____________________ Fortran ____________________

VMS ____________________ Basic ____________________

MAC ____________________ C or C++ ____________________

PC ____________________ HTML ____________________

Other____

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Describe generally the type of research you would like to do if appointed. Please also specify your primary area of interest under such general categories as computer science, technology applications, physics, etc.

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Describe any non-Fermilab work experiences and/or related experiences which you feel would assist the selection committee in placing you. For example, include special skills (drafting, welding, etc.) and training you feel would be applicable in a research setting.

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References

List the two individuals whom you have asked to complete the recommendation forms.

Name	Title	Organization	Phone

What School or District goals do you expect to address as a result of your TRAC participation and how do you expect to make use of the TRAC experience to accomplish these goals?

Would you like to obtain course credit? ______________________

Desired beginning and end dates for appointment: ______________________

I certify that the information contained herein is true, complete and correct, and that I plan to return to the classroom as a teacher for the year following my appointment.

Signature of Applicant Date

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Endorsement by School Official:

The school considers that an appointment for this faculty member to the Fermilab Teacher Research Associates Program (TRAC) will be a valuable aid to the school's instructional program. I will support and encourage this applicant, if appointed, to share the research experience with his/her colleagues and to use professional development time to put programs in place to transfer his/her newly acquired knowledge and experience back to the classroom.

Applicant's Name ______________________________ Date ________________

Endorser's Name ____

Endorsement must be made by school principal or other authorized official with title

Signed ______________________________ Date ________________

Title ______________________________ Phone ________________

School/Address ____

____

Fermi National Accelerator Laboratory
Teacher Fellowship Recommendation Form

To be completed by Applicant:

To the applicant: Type or print your name in the space below and give this form and an envelope with your name written on the front to a person who knows you well enough to evaluate your professional qualities and abilities. Please ask that person to seal the completed recommendation form in the envelope, sign across the flap, and return the envelope to you to mail with your application.

Name ____

To be completed by Individual Writing Recommendation:

Please type or print the information below and write a recommendation letter following the instructions below.

Name____

Signature____________________ Date____________________

Title____________________ Phone____________________

Address____

____

Instructions

The Fermilab Teacher Fellowship offers the opportunity for a professional research experience conducting high-energy physics research at Fermi National Accelerator Laboratory. Participants are selected following the review of application materials by a committee of lab researchers and Fermilab educational program staff. Please address the following areas in your recommendation letter.

1. How long and in what capacity you have known the applicant;

2. The applicant's abilities as a teacher/researcher, including knowledge of subject matter, teaching ability, leadership qualities, previous research experience, and any special activities or initiatives the applicant has undertaken in relation to science, math or technology education;

3. The applicant's ability to adapt quickly to an unfamiliar work setting, learn new skills, and work as part of a team;

4. Any other comments you feel will assist in determining how this appointment will enhance the applicant's teaching abilities, professional development, and leadership.

Please seal this form and the completed recommendation in the envelope provided, sign your name across the sealed envelope flap, and return the sealed envelope to the applicant to submit with the application package. Thank you.

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