Application Form

Akademie DeutschlandStudien Wittenberg

June 13 - July 5, 2010

FELLOWSHIP PROGRAM

Please print or type the information requested below.
One registrant per form. Please duplicate for additional registrations.

_____
Last Name First Name Middle Initial

_____
Mailing address (include street, city, state, and zip code)

Is this address home? □ or work? □

_____
School(s) where you teach German Job title

_____
Home telephone (include area code) Work telephone (include area code)

_____
FAX number (include area code) E-Mail address

How long have you taught German? □ 0-3 Years □ 4-8 Years □ 9 or More Years

What grade level(s) do you teach? (Check all that apply)

□ K-8 □ Grade 9 □ Grade 10 □ Grade 11 □ Grade 12

Application Instructions:

A complete application consists of the following components:

□ Application Form (this form) □ Professional Resume

□ Application Letter indicating how this Program fits with your professional goals
[2 pages maximum, single-spaced, 12-point font]

□ One-page statement *in German* that describes your school and how the Akademie's full German immersion experience will benefit you and your students.

Send complete application to:

Dr. Sabine Engel, director
Center for German & European Studies
Akademie DeutschlandStudien Fellowship Program
University of Minnesota
214 Social Sciences Building
267 - 19th Avenue South
Minneapolis, MN 55455

Application Deadline:

All applications must be **RECEIVED** by
Tuesday, Jan. 19, 2010 (4:30 p.m.)