



# Academy for Character Education

■ Character ■ Home-Linked ■ Personalized ■ Classical

P.O. Box 1652 Cottage Grove, OR 97424

Phone (541) 942-9707 Fax (541) 942-7884

*AceClassicalEd.org*

## Instructor Information

Instructor Name: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone/Alternate Number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

(This information is kept confidential)

Mailing Address: \_\_\_\_\_

### I am available to teach the following subjects:

Subject: \_\_\_\_\_ Subject: \_\_\_\_\_

Subject: \_\_\_\_\_ Subject: \_\_\_\_\_

Subject: \_\_\_\_\_ Subject: \_\_\_\_\_

### I will teach the following (please circle):

#### 1. Size Groups:

Any                  Tutorial (1)                  Small (2-5)                  Intermediate (6-15)                  Large (16+)

#### 2. Grade Levels:

K    1    2    3    4    5    6    7    8    9    10    11    12    GED

#### 3. At These Locations

Cottage Grove/Dorena/Creswell \_\_\_\_\_ Pleasant Hill/Dexter \_\_\_\_\_ Lowell/Fall Creek \_\_\_\_\_

Oakridge/Westfir \_\_\_\_\_ Other \_\_\_\_\_ (Please specify where)

**Credentials/Licenses:** Do you have a current or past teaching license? \_\_\_\_\_ (Yes) \_\_\_\_\_ (No)

Do you have a Bachelor of Arts? \_\_\_\_\_ (Yes/No) If yes, \_\_\_\_\_ (Subject)

I am available to begin instructing on : \_\_\_\_/\_\_\_\_/\_\_\_\_ (date)

\_\_\_\_\_  
Instructor Signature

\_\_\_\_\_  
Date

**With this application, please submit the following:** Resume \_\_\_\_\_ Current References \_\_\_\_\_

Before teaching, ODE Fingerprinting/Background Check must be completed (paperwork can be obtained from ACE office).