Printed Name and Title

APPLICATION PART 1 MASTER TEACHER LEADERSHIP DEVELOPMENT COHORT 23

Name: Title:				
				Department/Division:
Office Address:				
Office Phone:				
Email:				
1.	 I would like to be selected to be a member of Cohort 23. If selected, I WILL attend every Wednesday afternoon class (12:30-5:00) throughout the year. 			
	Signature of Applicant		Date	
2.	I have CONFIRMED my faculty status as a regular, full-time with SMHS Facu (smhsfacaffairs@gwu.edu, 202-994-3266).			
	OR My department has initiated my faculty appointment—it is in progress.			
	Signature of Applicant		Date	
3.	other responsibilities to attend in-persor	upport this application and I will ensure the applicant is free from clinical and esponsibilities to attend in-person classes every Wednesday afternoon beginning nber 4th, 2024 through June 18th, 2025.		
	Signature of Division/Department Chair		Date	

Attach the following to this form:

- Your current CV or resume
- A **one-page** statement of purpose describing your previous teaching activities, why you are interested in the program, and how you plan to apply what you learn
- Two letters of recommendation (one-page each) that speak to your current and future potential as an educational leader. One of these must be from your division or department chair.

Deliver all the materials on or before January 5th, 2024 to:

Francine Krull

Program Manager Master Teacher Leadership Development Program

Tel.: 202-994-1607 (o) Email: <u>fkrull@gwu.edu</u>