Reading Recovery®

Saint Mary's College of California University Training Center

2022-2023 Teacher Leader Application Form

Send Application and Teacher Leader Training Commitment Form to:

Saint Mary's College of California KSOE C/O Dr. Adria Klein 1928 St. Mary's Road, PMB 4350 Moraga, CA 94575

CONTACT INFORMATION

Adria Klein, Ph.D., Reading Recovery Trainer and UTC Director

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Debra Rich, Ed.D., Reading Recovery Trainer and UTC Assistant Director

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APPLICATION DEADLINE

Teacher Leader applications are due by <u>June 30, 2022.</u> (Contact the program director if an extension is needed.)

RESPONSIBILITIES OF A TEACHER LEADER

These are outlined on the separate <u>TL Commitment Form</u>. Please read and discuss with the district prior to completing this application form. The signatures on the last page of both documents indicate both the district's and Teacher Leader candidate's agreement with these responsibilities.

DISTANCE LEARNING OPTIONS

TL training now includes a distance learning hybrid option with some sessions on campus in person and others available in live time through a video platform option. These options and the schedule will be tailored to the situation of each TL applicant. Attendance on campus in August for the TL Assessment Week is expected. Please contact the TL Trainer to discuss and arrange a personalized plan.

READING RECOVERY

Teacher Leader Application Form

POSTMARK DEADLINE: June 30, 2022 (Contact the program director if an extension is needed.)

Interviews will be held either by phone or in person at the Saint Mary's College of CA University Training Center.

ALL APPLICANTS FOR THE TEACHER LEADER MUST HOLD AT LEAST A MASTER'S DEGREE OR APPROVED EQUIVALENT TO ENTER THE PROGRAM OR HAVE PRIOR WRITTEN AGREEMENT FOR CONDITIONAL ADMISSION FROM THE PROGRAM DIRECTOR.

Please carefully complete the information below.

Legal Name of Applicant,		
Last	First	Middle
Social Security Number (required for 0	College	
registration) Current Position		
District	County	
School Name		
School Address		
City		Zip Code
Cohool Dhono (include and		
code) Work F-mail		
Alternate E-mail		
Home Address		
City	State	Zip Code
Home Phone	Cell Phone	
Name of Proposed Reading Recove		ool, District, County or Agency
Is this an existing site?Yes	No	
Names of other Teacher Leaders at	this site:	

DIRECTIONS:

Please complete the following six (6) sections of this form. This form must be signed by both the applicant and the district superintendent.

SECTION I: TEACHING EXPERIENCE

A.	A minimum of five (5) years teaching experience is required, with no fewer than three		
	(3) years experience at the primary level (grades K-3) or in reading. Provide the		
	following information:Total number of years of teaching experience.		
	Total number of years of teaching experience at the primary level or in reading.		
В.	Has your teaching experience been within the last five (5) years?		
	YESNO If NO, please explain:		
C.	Is your school on a year-round or extended year schedule?		
	YESNO If YES, the students elected for the program must be on the		
	track that is closest to a traditional schedule. List starting and ending dates of your		
	school year in 20222023:		
	Start Date End Date		
D.	Are you interested in bridging to Descubriendo la Lectura after completing Reading		
	Recovery Teacher Leader training?		
	YESNO		
SEC	CTION II: READING/LANGUAGE ARTS EXPERIENCE (Use additional page if necessary		
Α.	Complete the following information and briefly describe the nature of your courses in reading/language arts:		
	Number of undergraduate courses in reading/language arts.		
	Number of graduate courses in reading/language arts.		
	Describe coursework at both levels:		

B. List other professional experiences related to your interest in reading/language arts (workshops, conferences, curriculum committees, etc.)

SECTION III: ADVANCED DEGREE(S)

NOTE: No applications may be considered for Teacher Leader unless the applicant has at least a Master's Degree; has an M.A. degree in process and nearing completion; or has received prior written agreement for conditional admission from the program director.

No Teacher Leader can complete training until the degree has been awarded regardless of quality of work in the Reading Recovery program.

Highest degree held:	Year earned:
University/College:	Major:
Additional information	

<u>SECTION IV: LEADERSHIP EXPERIENCE</u> (Use additional page.)

Please describe qualities and cite evidence of these qualities that support your ability to provide leadership as a Teacher Leader or Instructor of Teacher Leaders in the Reading Recovery Program (i.e., awards/recognitions, experiences with staff development programs, leadership positions, ability to interface and collaborate with others, etc.).

SECTION V: PROFESSIONAL VITA

Please attach a copy of your professional vita. Please complete an Affirmative Action Data Form (see last page).

SECTION VI: COMMITMENT

The success of the Reading Recovery® Program is dependent on the commitment of the Teacher Leader to fully participate in both the intensive training at Saint Mary's College of CA and the subsequent implementation of the program in the local site. Please refer to the Responsibilities of a Teacher Leader Commitment Form for a list of participant obligations. Return both this application and the Teacher Leader Commitment Form to Saint Mary's College of CA.

Program and I am willing to make this con from an accredited institution or will compl	oilities of a Teacher Leader in the Reading Recovery nmitment. I further verify that I hold a Master's Degree lete before being eligible to be certified as a Teacher and successfully complete the required graduate courses
Signature of Applicant	Date
·	on (for new sites only) must be completed if the Teacher the site. This will be sent from the Saint Mary's College eptance.
Signature of Applicant	Date
	, (Superintendent's Name Printed) on behalf of the District have read and agree to the requirements of gree to remit payment for training fee and tuition within purchase the required teaching materials. Full details or ader Commitment Form.
Signature of Superintendent	Date
District	County

DEMOGRAPHIC DATA SHEET

The Federal Government requires the College to compile the following statistics of all applicants. Accordingly, we ask that you complete this form. No information presented heron will be used in the selection procedure and the form will be maintained from your applicant file.

Name_	
Date	
Sex:	
	Male
	Female
<u>Ethnici</u>	ty:
	Hispanic/Latino
	Non-Hispanic/Latino
Race:	
	American/Alaska Native
	Asian
	Black or African American
	Hawaiian/Pacific Islander
	White
	Asian/Pacific Islander