



Tellin' Stories Race, Equity, and Family Engagement Summer Institute for Teachers and Staff 2019 Participant Application

The Tellin' Stories Race, Equity, and Family Engagement Summer Institutes will teach participants to apply an asset-based lens to family engagement that is grounded in popular education, community organizing, racial equity, and family engagement research. Educators from public and public charter schools in the D.C. area and nationwide are welcome and encouraged to participate. A limited number of scholarships are available to educators from eligible schools.

The June 25-27 teacher and staff summer institute is designed for teachers, counselors, support staff, school administrators (including assistant principals), and school-based parent coordinators and liaisons from Title I elementary schools.

REGISTRATION WILL CLOSE WHEN FILLED OR BY MAY 31, 2019

This application may be completed online at TeachingforChange.org/TSsummer2019. Completed Word or pdf applications may be emailed to ts@teachingforchange.org. For questions or more information, contact ts@teachingforchange.org or call 202-588-7204 x31.

Name: _____

Role or title: _____
e.g. 1st grade Teacher, Counselor, Parent Coordinator, ELL Teacher, Assistant Principal

Email address: _____

Phone: _____

School: _____ **City, State:** _____

Please check the following:

Select all that apply

- My school has an early childhood program (pre-K, preschool, Head Start)
- My school is a Title I school
- The majority of families are low-income, immigrant, and/or racial and ethnic minorities
- My school is a public or public charter school

Scholarship eligibility:

Select all that apply

- My school is a DC Public School (DCPS) located in Wards 7 or 8
- My school received a Comprehensive Support and Improvement Schools, type 1 (CS1) designation from OSSE (i.e. bottom 5% on the ESSA STAR rating)
- I may be eligible but am unsure

What do you hope to gain from participating?

Will the \$400 registration fee be paid by your school/school district?

- Yes
- No
- Other _____

Individual authorizing your participation: _____

Office/department that will pay the invoice: _____

Address for invoicing: _____

Name of contact for invoicing: _____

Email of contact for invoicing: _____

Phone number for invoicing: _____

Notice about cancellations and refunds:

- I understand that no refunds will be issued if I cancel my registration within 20 days before the start of the institute

Optional Information

What grades do you teach/serve? Select all that apply.

- Pre-K
- K - 2nd
- 3rd - 5th
- 6th - 8th
- 9th - 12th

Preferred gender pronouns (e.g. she/her, he/his, they/them): _____

Please describe your race or ethnic background. _____

If you are traveling from outside of the D.C. area, would you like information about affordable, temporary housing options?

- Yes
- No

Please share anything you would like the facilitators to know if you are accepted.
