1st document: Application Form

Last Name:	First name :				Chinese Name:中文姓名									
Passport Last Name	Passport First Name													
Address:														
City/Town			State				Zip							
Home Phone: Work Phon			ne:	e:			Cell Phone:							
E-mail: Please print clearly School Name:		er E-mail:												
School Address:														
School Address:														
City/Town						State		Zip						
What is your current teaching load?						Full time	Part time			%				
How many years have you taught Chinese?			ntary	yrs	Middle/Juni			•	High school			hool	yrs	
How long have been a Since 2 CLASS member?			2018		Since 2013 Since 200					800				
Have you participated in CLASS sponsored conference/workshop before?				No	No If yes, when?									
Do you know how to create a			Yes	No	No If yes, he			ow do you rate your skills:						
PowerPoint presentation?								mode	erate novice					
Are you familiar with the World-			Yes	No)	If yes,								
Readiness Standards for Learning Languages						thoroughly								
Have you developed a Thematic Unit as an instructional material before?			Yes	No	No If yes, Name of your Thematic Unit?						it?			
\$ 300 Registration fee (non-refundable, if accepted; if not, this will be returned). \$ 400 deposit is required but it will be returned upon the completion of the Summer Institute at the end of the second week. (if not accepted the check will be return) Please make two separate checks payable to CLASS. Send two checks with the application form; your letter of statement; and a recommendation letter (or use the recommendation form provided) to Dr. Yu-Lan Lin 9 Clinton Path #3 Brookline, MA 02445														

If you are not a CLASS member, but wish to apply, please go to CLASS website: www.classk12.org to register as new CLASS member.

CLASS annual membership fee is \$40.00 (from January to next January)