



# Application for the Teaching Fellows Program

Return to the Director of the Graduate Institute  
Shimer College • 3424 S. State Street • Chicago, IL 60616

Fall \_\_\_ Spring \_\_\_ 20\_\_\_

## Name & Address

\_\_\_\_\_  M  F  
Last First Middle, Maiden or Former

Prefer to be called (nickname) \_\_\_\_\_

Email \_\_\_\_\_

Permanent Address \_\_\_\_\_

Mailing Address (if different from Permanent Address)

Use this address until (date) \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

Line 2 \_\_\_\_\_

Line 2 \_\_\_\_\_

City State Zip \_\_\_\_\_

City State Zip \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_

Social Security Number \_\_\_\_\_

Date of birth (mm/dd/year) \_\_\_\_\_

Place of birth \_\_\_\_\_

Are you a U.S. citizen?  Yes  No If not, are you a permanent resident?  Yes  No If not, what is your citizenship? \_\_\_\_\_

Please identify yourself, checking all that apply. (This is an optional question.)

Asian American, Pacific Islander  Eskimo, Aleut, Native American  White  Hispanic, Latino

African American, Black  Other (specify) \_\_\_\_\_  Multiracial (specify) \_\_\_\_\_

Would you like to be considered for Financial Aid?  Yes  No

Please list all post-secondary institutions attended and degrees awarded (if applicable).

Attended

From:

To:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you a certified teacher?  Yes  No

What subjects do you teach?

\_\_\_\_\_

\_\_\_\_\_

**ACADEMIC INTERESTS**

List the academic areas in which you have the greatest interest.

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

List the extracurricular or community activities you enjoy.

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**RECENT EMPLOYMENT HISTORY**

Employer	Position	Dates of employment
_____	_____	_____
_____	_____	_____
_____	_____	_____

**REFERENCES:**

1. _____	(_____)	_____	_____	_____
Name	Phone Number	Email Address	Relation	
2. _____	(_____)	_____	_____	_____
Name	Phone Number	Email Address	Relation	

**COMPLETE YOUR APPLICATION WITH THE FOLLOWING DOCUMENTATION:**

1. Application fee of \$25 by check or money order made payable to Shimer College
2. Official transcripts from **each** college attended
3. An interview which may be conducted on the Shimer campus or by phone
4. A Personal Statement briefly describing how you hope the Teaching Fellows Program will help you as a teacher.

Send transcripts and all other application materials to:

Shimer College  
 Director of the Graduate Institute  
 3424 S. State St.  
 Chicago, IL 60616

Questions? Contact us at 312.235.3525 or TFP@shimer.edu.

**The information supplied by me on this application is true, complete, and correct to the best of my knowledge.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date