

SOUTHWEST MULTISENSORY TRAINING CENTER

600 SOUTH JUPITER ROAD
ALLEN, TX 75002-4065
972.359.6646 FAX: 972.359.8291

APPLICATION FOR ACADEMIC LANGUAGE THERAPIST MULTISENSORY INTEGRATION OF READING AND COMPOSITION TAKE FLIGHT CURRICULUM

Name: _____ Social Security: _____ Birthdate: _____
Address: _____ City: _____ State: _____ Zip: _____
Hm Phone: _____ Wk Phone: _____ Marital Status: _____

EDUCATION

Undergraduate Degree: _____ Year: _____ Major: _____
College: _____
Teaching Certificate(s): _____
Graduate Degree: _____ Year: _____ Major: _____
College: _____
Teaching Certificate(s): _____

EXPERIENCE

Now Teaching _____ Yes _____ No _____ Grade(s) _____
Name of School: _____
Related Skills: _____

How did you hear about our program?

Date _____ Signature _____

Please send in with your application by March 1st:

- \$100.00 Deposit – non-refundable; applied against tuition
- Three References
- Copy of college transcript(s)
- Copy of college degree

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ABSENTEE POLICY

If for any reason you must miss a class, you will need to do the following things:

1. Meet with a willing classmate to find out what you missed.
2. Write up the information that was missed and give to instructor or send to training center.
3. Attend a learning difference or reading related conference for the number of hours you missed in class.
4. Write up notes from the conference and send to training center.

Beverly Dooley, Ph.D., Director

**Peggy Brooks, CALT
Instructor**

**Sarah Lewis, ALT
Instructor**

* Certificate of completion for each course will be awarded upon receipt of the above.

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REFERENCE FORM

We would appreciate your completing this form and returning it to the Training Center. *This form is confidential.*

Beverly Dooley, Ph.D.

How long have you known the applicant? _____

The applicant's position in your school system was _____

What was your official relationship with the applicant? _____

Would you employ this person? _____

APPLICANT'S CHARACTERISTICS	Unknown	Below Average	Average	Above Average	Superior
General Appearance					
Personality					
Enthusiasm					
General Health					
Commitment					
Judgment					
Emotional Poise					
Professional Ethics					
Cooperation with Administration					
Cooperation with Co-Workers					
Public Relations					
Willingness to Accept Suggestions					
Interest in Professional Growth					
Knowledge of Subject Matter					
Organization and Planning					
Classroom Control and Management					
Skill as a Teacher					
Provision for Individual Differences					

The applicant's weakest characteristic is _____

The applicant's strongest characteristic is _____

Do you feel a telephone conversation would be beneficial? Yes _____ No _____

Additional Comments: *(use back if necessary)* _____

Signed: _____ School: _____ Date: _____

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