

SMI/CMST MENTOR TEACHER INTEREST FORM
2010-2011

Please alert your school site administration of your participation with the SMI program and notify them that you are expecting SMI to assign mentees/apprentice to your classroom. If your administrators have any questions, please advise them to contact smi@ucr.edu.

First Name: _____ Last Name: _____
Mailing Address: (street number & name) _____ (city) _____ (zip code) _____
E-mail Addresses: _____ [work] _____ [personal]
Phone Numbers: (____) _____ [work] (____) _____ [home or cell]

All submitted information will remain confidential and for SMI/CMST use only.

1. Information about your current school experiences.

- a. School Name _____
- b. School District _____
- c. What grade level do you teach?
 - Elementary: Specify _____
 - Middle School: Specify _____
 - High School: Specify _____
- d. What subject(s) do you teach? Check all that applies.
 - Multiple Subjects
 - Mathematics: Specify _____
 - Science: Specify _____
- e. Number of years you have taught at this school site.
 - 0-5 Years
 - 6-10 Years
 - 11-20 Years
 - 20+ Years
- f. What is your current teaching credential?
 - Intern Teaching Credential
 - Preliminary Teaching Credential
 - Professional Clear Teaching Credential

2. Total number of years you have been teaching.

- 0-5 Years
- 6-10 Years
- 11-20 Years
- 20+ Years

3. In what area is your baccalaureate degree?

- Mathematics
- Science: Biology
- Science: Chemistry
- Science: Physics
- Science: Other
- Engineering
- Education
- Other

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4. Have you participated in professional development with California Science Project (CSP) or the California Mathematics Project (CMP)?
 ___Yes ___No
5. What type of UC sponsored professional development or training programs have you participated? Check all that applies.
- SMI Summer Institute, *Scientific Teaching*
 - MATE
 - Copernicus
 - Inland Area Science Project
 - Math ACTS
 - Other _____
6. Please list *any other* professional development, in-service and/or training workshops/programs you have completed the last *five* years. Please also include specific training related to serving as a mentor teacher. _____

7. Briefly describe reasons for your interest in becoming a mentor teacher for either SMI and/or CMST programs.
8. To help us with the pairing of mentor/mentee assignments, please indicate your preferences for the number of mentees (UCR students) you would like to receive *per semester*.
- Only One (1)
 - Up to two (2)
 - Up to three (3)
 - No more than four (4)
 - No preference
9. How many hours/period per semester are you available to serve as a mentor? Please, be sure to include the times that you teach.
- One hour/class period Time _____
 - Two hours/class periods Times _____
 - Three hours/class periods Times _____
 - Four hours/class periods Times _____
 - Five hours/class periods Times _____
 - Six hours/class periods Times _____
10. Would you be willing to mentor your assigned mentee in developing and implementing whole group lessons to conduct in your classroom? ___ yes ___ no

Please submit completed form to SMI Resource Center via one of the following methods:

Email: smi@ucr.edu

Fax: (951) 827-4971