



HIGH SCHOOL AND
PRE-COLLEGE PROGRAMS
HAGEDORN HALL 201

ONE SOUTH AVENUE
GARDEN CITY, NY 11530

T 516.877.3046
F 516.877.3242

New Teacher Approval Form

Please submit this form along with supporting materials for consideration to teach an Adelphi High School Program course. Teacher's documents will not be accepted without this accompanying form.

Checklist:

- ✓ Current resume/CV
- ✓ Undergraduate/Graduate Transcripts
- ✓ Evidence of teaching for at least 3 years
- ✓ Evidence of a Master's Degree in the subject area being taught (or a Master's Degree in Education with a concentration in the subject area)

High School Information	
High School Name _____	
High School Address _____	
School Contact Person	
Name _____	Job Position _____
Phone # (____)____-____	Email _____

Full Name of Applicant/Teacher

Adelphi course equivalent that teacher intends to lead:

Course # _____ - _____	Course Title _____
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Target Start Date for this teacher to lead a course: **FALL** _____ **SPRING** _____

Submission of this form does not guarantee that a teacher will be approved to lead an Adelphi High School Program Course.