

Future Faculty Program Application

PRINT NAME _____

DATE _____ STUDENT NUMBER _____

GENDER _____ RACE/ETHNICITY _____

LOCAL ADDRESS _____

HOME PHONE NUMBER _____

WORK PHONE NUMBER _____ FAX _____

EMAIL ADDRESS _____

ENROLLMENT STATUS (circle one): FULL TIME PART TIME

DEGREE SOUGHT _____

DEPARTMENT IN WHICH YOU ARE ENROLLED _____

DO YOU HAVE A GRADUATE ASSISTANTSHIP? (circle one) YES NO

DATE YOU BEGAN YOUR CURRENT PROGRAM _____

INDICATE YOUR CURRENT PROGRAM STATUS:

- Pre-comps
- Post-comps
- Data gathering for dissertation
- Dissertation proposal approved
- Writing Dissertation

DATE OF EXPECTED COMPLETION _____

Program Requirements

If you are selected for this program, you will be required to:

- participate in a semester-length course on College Teaching (ELFH 683).
- participate in a series of seminars (September through April) dealing with issues in higher education and teaching.
- you will be expected to meet at least once monthly with an assigned mentor.

If you miss more than two of the College Teaching classes, or two of the seminars, or fail to keep more than two of your mentoring sessions, you will NOT qualify for the certificate awarded to participants in this program (though you will be allowed to continue to attend all program components).

PLEASE RESPOND TO THE FOLLOWING QUESTIONS

1. Why are you interested in participating in the Future Faculty Program? What benefits do you expect to derive from your participation?

2. In what kind of higher education institution (i.e., research university, comprehensive university, liberal arts college, community college, etc) do you hope to take your first full-time position? Why?

3. Which duties of a faculty member do you anticipate will be the MOST enjoyable for you? Which do you anticipate will be the LEAST enjoyable? Why?

By your signature below, you indicate that you understand and accept these conditions.

SIGNATURE

DATE

ADVISOR RECOMMENDATION

I _____ approve/ _____ do NOT approve this application of

to participate in the Future Professors Program.

SIGNATURE

DATE

PLEASE RETURN THIS COMPLETED APPLICATION TO:

Dr. Robert Ronau
Associate Dean for Research
Future Professors Program
College of Education and Human Development
Phone: (502) 852-0593
Email: bob@louisville.edu