

**Teachers Without Frontiers – Ustaad Taa Hadd -
A Blended Learning Program for Teachers Continuous Professional Development**

The filled application form must be sent latest by 20 th March 2015 to the following address	
Idara-e-Taleem-o-Aagahi (ITA) Lahore Office 70-B-1, Gulberg III Lahore, Pakistan Tel: (+92) (42) 35711107-9	Idara-e-Taleem-o-Aagahi (ITA) Karachi Office Bungalow no- F-70, block no 8 KDA, Scheme no 5, Kehkashan Clifton, Karachi Tel: (+92) (21) 35295030
For all enquiries call Coordinator TWF Email: coordinator@itacec.org	

Name of Teacher:	
Province:	City/District:
Designation:	
Subject/Grade Teaching:	
Name of School:	
Type of School: Public <input type="checkbox"/> Private <input type="checkbox"/> Madrassah <input type="checkbox"/> Other	
School/College Address:	
Gender: Female <input type="checkbox"/> Male <input type="checkbox"/> DOB: __/__/__ (DD/MM/YYYY)	
National Identity Card No.	
Home Address	
Telephone/Mobile Number:	
Email:	
Website of institution, if any:	
Are you currently enrolled in any professional course, training or degree? Yes <input type="checkbox"/> No <input type="checkbox"/>	

2. Education [Indicate college/university and other specialized education of staff member, giving names of institutions, degrees obtained, and dates of obtainment:

Institution	Degrees obtained & Subject	Year	Grade/Division

3. Employment Record

List in reverse order every employment held (last 4 positions) by teachers/head teachers since graduation, using format below: dates of employment, name of employing organization.

Position Held	Name of Organization	From	To	Subject/Grade if position held as Teacher/Head Teacher

4. How many languages can you read, write and speak? Indicate language fluency by ticking on (R = Read, W = Write, S = Speak) boxes

Language(s)	Excellent	Good	Average
	R <input type="checkbox"/> W <input type="checkbox"/> S <input type="checkbox"/>	R <input type="checkbox"/> W <input type="checkbox"/> S <input type="checkbox"/>	R <input type="checkbox"/> W <input type="checkbox"/> S <input type="checkbox"/>
	R <input type="checkbox"/> W <input type="checkbox"/> S <input type="checkbox"/>	R <input type="checkbox"/> W <input type="checkbox"/> S <input type="checkbox"/>	R <input type="checkbox"/> W <input type="checkbox"/> S <input type="checkbox"/>
	R <input type="checkbox"/> W <input type="checkbox"/> S <input type="checkbox"/>	R <input type="checkbox"/> W <input type="checkbox"/> S <input type="checkbox"/>	R <input type="checkbox"/> W <input type="checkbox"/> S <input type="checkbox"/>
	R <input type="checkbox"/> W <input type="checkbox"/> S <input type="checkbox"/>	R <input type="checkbox"/> W <input type="checkbox"/> S <input type="checkbox"/>	R <input type="checkbox"/> W <input type="checkbox"/> S <input type="checkbox"/>

5. What innovation in teacher training programs/workshops do you desire? (Multiple Selection)

- E-Readiness/ Technology Based Learning
- Self Advocacy opportunities through blogs, publications etc
- Project Based Learning
- Global Connections
- Lessons on multidisciplinary teaching

Other _____

6. Explain briefly your motivation to join “Teachers Without Frontiers”- A blended learning program (100-150 words)

Certification:

I, the undersigned, certify that to the best of my knowledge and belief, this form above correctly describes me, my qualifications, and my experience. I understand that any wilful misstatement described herein may lead to my disqualification or dismissal from the program.

_____ *[Signature of applicant]*

Date: 17/03/2015 *Day/Month/Year*