



JET APPLICATION 2011-2012

BRISTOL COMMUNITY COLLEGE & UNIVERSITY OF MASSACHUSETTS DARTMOUTH TRANSITION TO TEACHING (TTT) GRANT

JET - Journey Into Education and Teaching - an accelerated program for paraprofessionals to earn their bachelor's degree and Massachusetts Teacher Licensure in Elementary Education and Moderate Disabilities.

Eligibility Requirements

- Employed as a paraprofessional in a Massachusetts public school (two years experience preferred)
- Highly qualified (NCLB standards)
- Do not possess a bachelor's degree

Applicant's Responsibilities

- _____ Complete this *JET* application (also available online at www.umassd.edu/cusp/jet) AND enclose:
 - ___ Unofficial transcript(s) of prior college coursework (if applicable)
 - ___ Letter of Recommendation from current school principal or classroom teacher (indicated on p. 2)
 - ___ Personal Statement (indicated on p. 2)
- _____ Complete the intake process (interview, assessment, advisement)

Upon acceptance into the JET Program

- _____ Fill out a FAFSA (Free Application for Federal Student Aid) application at www.fafsa.ed.gov
- _____ Apply for the *Massachusetts Paraprofessional Teacher Preparation Grant* at www.osfa.mass.edu/default.asp?page=paraprofessional
- _____ Enroll in a minimum of two courses per semester

Part 1: Personal Information

Name: _____ Social Security Number: _____ - _____ - _____
Last First Middle

Address: _____
Street / P.O. Box City State Zip

Phone: _____ E-mail address: _____
Home Cellular

Birth Date: ____ / ____ / ____ Sex: F M U.S. Citizen: Yes No

MA Resident: Yes No Ethnicity: Native American African American
 (Optional) Asian Native Hawaiian/Pacific Islander
 White Other _____
 Hispanic Multi-Race/Non-Hispanic

Is English your native language? Yes No If not, what is? _____

Do you own a computer? Yes No Can you use: Word Excel PowerPoint E-mail

How did you find out about the *JET* program?

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District: _____ School: _____

Principal: _____ Grade: _____

Date of hire: _____ Total years as a paraprofessional: _____

Name of teachers with whom you work: _____

Do you work with special needs students? Yes No

If so, in what capacity?

___ Inclusion Classroom ___ Self-Contained Classroom ___ One on One ___ Other _____

Please submit a Letter of Recommendation from your principal or a teacher with whom you work.

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Secondary: High School Diploma GED Adult Diploma

College Coursework:

Name of Institution	Location (City/State)	Dates Attended	College Major	Degree Earned or amount of credits

Please provide unofficial college transcript(s) with this application.

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Please attach a typed statement indicating your desire to teach in a high-need Massachusetts elementary school. Include some experiences that have influenced your decision. Also include a brief description of your classroom responsibilities. This will be used to aid in the selection of individuals for interviews.

Applicant's signature: _____ Date: _____

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Return hard copy to:

Joanne Gracia, JET Grant Coordinator
Bristol Community College
188 Union Street
New Bedford, MA 02740

or

Pam Herrup, JET Project Director
CUSP at UMass Dartmouth
200 Mill Road, Suite 150C
Fairhaven, MA 02719