NAME:_____

COUNTRY:SENEGAL_____

Teaching Excellence and Achievement Program (TEA)

A program of the Bureau of Educational and Cultural Affairs (ECA), U.S. Department of State

2015 INSTITUTIONAL SUPPORT AND REFERENCE FORM

This institutional support and reference form is to be completed by your supervisor at the school where you are employed. The form must be hand signed.

An English translation should be provided if the form and reference letter are not written in English.

To be completed by the applicant:

Name of Applicant:_____

Name of Supervisor:_____

Job Title of Supervisor:_____

Name of School:_____

City of School:_____

Telephone of Supervisor:_____

E-mail of Supervisor:_____

The Teaching Excellence and Achievement Program (TEA) provides international teachers with unique opportunities to develop expertise in their subject areas, enhance their teaching skills and increase their knowledge about the United States. TEA consists of a six-week non-degree, non-credit customized academic program including seminars on new teaching methodologies, curriculum development, lesson planning, and instructional technology. Participants will also participate in a field experience in a U.S. secondary school near the host university to work closely with U.S. teachers and teach and present to U.S. students. Cultural enrichment, mentoring, and support will be provided throughout the program. The international participants will travel to the United States in two cohorts of approximately 75 teachers each in spring or fall 2015. Upon returning home, TEA program alumni are eligible to apply for small grants for essential teaching materials, follow-on training for other teachers, collaborative projects between schools in their home country and the United States, and other activities that build on their U.S. experience.

To be completed by the supervisor:

1. Please check the **top 3 qualities** that your teacher demonstrates:

☐	Tolerance	☐	Passion for teaching
☐	Respect	☐	Team-Work
☐	Outspokenness	☐	Leadership
☐	Care for students	☐	Flexibility
☐	Promotion of new ideas	☐	Positive reputation

*NAME:*_____

COUNTRY: SENEGAL_____

2. In the space provided below please write or type a recommendation letter expressing why this teacher should participate in the TEA program and how you think both the teacher and your school would benefit. What teaching skills and professional characteristics distinguish this teacher from other teachers in your school?

*NAME:*_____

COUNTRY: SENEGAL

2015 Teaching Excellence and Achievement Program (TEA)

A program of the Bureau of Educational and Cultural Affairs (ECA), U.S. Department of State, and implemented by IREX

I certify that our school is pleased to participate in the 2015 Teaching Excellence and Achievement Program (TEA) funded by the U.S. Department of State's Bureau of Educational and Cultural Affairs and administered by IREX, in the event the representative of the institution is selected for participation in the program.

Our school will provide assistance to our TEA Participant throughout the program duration by supporting him or her to participate in the six-week TEA program activities in the United States in 2015. I understand that program activities will include a professional development program at a U.S. university, including coursework and/or customized seminars and intensive training in the following: teaching methodologies, lesson plan development, and teaching strategies for diverse school environments, and instructional technology. The program will also include a field experience at a secondary school to engage participants actively with U.S. teachers and students.

Ms./Mr. _____ will be granted leave

- ◯ **with pay**
- ◯ **without pay**

during this time and will be re-instated upon his or her return to the school.

I recognize the importance of this program in the pursuit of advancement and development for the school's teachers and look forward to the applicant's participation in the program.

Name of School Director _____

Signature of School Director **(must be hand signed)** _____

Date _____