



# Notice of Interest

## 2022 Mitchell Institute Physics Enhancement Program

Name \_\_\_\_\_

District and Campus \_\_\_\_\_

**Teaching Assignment:** *please circle all that apply (must include at least one section of physics for the 2021-2022 school year):*

- 5
- 6
- 7
- 8
- Bio
- Chem
- Physics
- Pre-AP/ AP Physics
- Principles of Technology
- Advanced/Honors Physics

I am interested in participating in the 2022 Mitchell Institute Physics Enhancement Program:

Yes \_\_\_ No \_\_\_

Please indicate the number of years that you have been **teaching physics** (including the upcoming 2022-2023 school year):

1 \_\_\_ 2 \_\_\_ 3 \_\_\_ 4 \_\_\_ 5 \_\_\_ 6+ \_\_\_

Please indicate the number of years that you have been **teaching** (including the upcoming 2022-2023 school year):

1-3 years \_\_\_ 4-6 years \_\_\_ 7-10 years \_\_\_ more than 10 years \_\_\_

Please indicate the number of **physics credit hours** you received in college:

0 \_\_\_ 3 \_\_\_ 6 \_\_\_ 9 \_\_\_ 12 \_\_\_ 15+ \_\_\_

Please list your current **teaching certification(s)**:

Please list your university(s), major(s), and **college degree(s)** obtained:

In the space below, or on a separate page, please write a brief summary about why you are interested in attending MIPEP:

Given the choice, would you prefer an in-person or a live-streamed virtual format of the program?

**I understand that my commitment will include:**

- Full participation in all program activities on June 13-25, 2022
- Providing classroom data as requested, should a physics assessment be developed for students
- Sharing favorite physics classroom activities and/or resources with other participating teachers
- Written commitment from myself and my administrator to teach at least one section of high school physics during the 2022-2023 school year

**Contact Information:**

**Name:** \_\_\_\_\_

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Home/Cell phone: \_\_\_\_\_

Home e-mail address: \_\_\_\_\_

School Address: \_\_\_\_\_  
\_\_\_\_\_

School phone: \_\_\_\_\_

School e-mail address: \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Please email to:**

Dr. Janie Head  
Email: mhead@lcisd.org  
Phone: 281-682-1123;; text preferred

AND

Amanda Barreiro  
Email: amanda@physics.tamu.edu  
Phone: 979-458-9249

**Date:** \_\_\_\_\_