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Lexington Sister Cities
Deauville, County Kildare, Shinhidaka, Newmarket

Deauville Teaching Assistantship Application

Application Instructions

The completed application packet will consist of the following:

- ☐ Deauville Teaching Assistantship Application
- ☐ Statement of Purpose (Describe your goals for your semester in Deauville and reasons why you should be considered for the assistantship in a one page essay.)
- ☐ Official transcripts of college/university coursework
- ☐ Two letters of reference addressed to the Deauville Teaching Assistantship Committee (A Deauville Teaching Assistantship Letter of Recommendation Form should be attached to each letter.)
- ☐ Evaluation of French Language Proficiency Form
- ☐ Photo of yourself. Make sure it is a close-up, like the one you would have for a driver's license. An informal photo is fine.

The application and all supporting documents should be submitted by email or to the address below by December 18, 2015.

Deauville Teaching Assistantship Committee

Sarah Martin
smartin@lexingtonky.gov

Lexington Sister Cities Commission
200 East Main Street
Lexington, KY 40507

Deauville Teaching Assistantship Application

Name (First, Middle, Last)

Date of Birth: / /
Month Day Year

Email (non-school):

Phone:

Education: Institutions attended since High School

Institution	From - To	Graduation
	/	
	/	
	/	

Current Academic Status

☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior ☐ Graduate

Current Cumulative GPA: Major: 2nd Major/Minor:

Language Study

Language	High School	College	Courses taken at College
	years	years	
	years	years	
	years	years	

GPA in French Language Courses:

Language Evaluation: List person whom you have asked to complete your language evaluation form.

Name:	Email:
Address:	Phone:

Scholarships, awards, honors, elected offices, and achievements

Employment

International Experience: country, length of stay, purpose (e.g., study, travel)

Interests and Recreational Activities

References: List two persons whom you have asked to provide letters of reference. At least one should be a university faculty member.

Name:	Email:
Address:	Phone:
How long and in what capacity have you known this individual?	

Name:	Email:
Address:	Phone:
How long and in what capacity have you known this individual?	

Emergency Contact Information:

Person in the United States you wish to have notified in the case of an emergency while you are abroad.

Name:	Email:
Complete Address:	
Phone:	Relationship to You:

Click to add image

_____

Applicant Signature and Date

Letter of Recommendation

Name (First, Middle, Last)

Optional: *Under U.S Federal Law (20 USC S. 1232g) the Family Educational Right to Privacy Act (FERPA)/Buckley Amendment, students are permitted to access certain records. The law also provides that students may waive the right to inspect confidential letters of recommendation. Many applicants have found that a recommendation letter written in confidence has a greater impact than one to which the applicant also has access.*

If you waive your right to inspect the information requested on this form, please sign below.

_____

Applicant's Signature and Date

To the Recommender:
This student is applying for the Deauville Teaching Assistantship. The chosen student will be teaching English in the Deauville Public School District. The applicants must be proficient in French and desire classroom experience with young students. Your candid appraisal of the student's propensity for a successful academic experience abroad is an important part of the application. Thank you!

Please attach this form to your letter.

Name of Recommender:

Title:

Signature: _____

Date:

Letters of Recommendation are due by December 18, 2015.

Send or email to:

Sarah Martin
smartin@lexingtonky.gov

Lexington Sister Cities Commission
200 East Main Street
Lexington, KY 40507

Letter of Recommendation

Name (First, Middle, Last)

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Evaluation of French Language Proficiency

Name (First, Middle, Last)

Years of French in High School:

List college level courses you have taken:

Course Number	Title	Grade	Semester

List college level courses you are taking/plan to take before beginning the Deauville assistantship:

Course Number	Title	Grade	Semester

EVALUATION BY AN INSTRUCTOR OF FRENCH

To the Evaluator: Your frank appraisal of this student's competence in French and ability to cope in French during the initial transition period abroad will be of use to the student and will help the Deauville Teaching Assistantship Committee make the best possible selections for this year's award.

Language Skill:	Excellent	Good	Fair	Poor
Ability to Speak French				
Ability to Understand Spoken French				
Ability to Read French				
Ability to Write French				

Please attach an additional page with any additional comments that you might have.

Name of Evaluator:

Title:

Signature:_____

Date:

Language Evaluatione due by December 18, 2015.

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