

Applicant Name _____

Date _____

Position held: Teacher / grade level/number of English Language Learners (ELL's) in classroom

Experience With English Language Learners

(The first entry is a sample of how to complete this form. List experience from most recent. Continue on back of this sheet if necessary.)

Dates of Experience	Agency	Contact Person or Supervisor	Your Responsibility	Ages of Students	Average Hours Per Week	Number of Months
9/5/96 – 6/25/98	Brick Elementary School	Mrs. Martinez	Assisted individuals and small groups with reading	7 – 8 years old	2 hours each day	8