

# Custom Designed EMI Teacher Training Program Proposal Request

The information provided on this form will be used to prepare a proposal of program fees and to create a tentative calendar of events. **Please complete this form to the best of your ability.** We will contact you regarding your request and work with you to develop a program that best fits your needs.

## 1. Organization Information

Name of Contact Organization: \_\_\_\_\_

Organization Background (brief history, number of students referred to U.S. institutions, etc.): \_\_\_\_\_

Name of School/Institution (if applicable): \_\_\_\_\_

Name of Contact: \_\_\_\_\_

Check One:  I am an agent.  I am from a school/institution.  I am from a school/institution and an agent will be involved.  
 I am from a government organization (please specify): \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

## 2. Program & Academic Information

Curriculum Type (check all that apply):

English Language Training  Teacher (EMI) Training  Other (please explain): \_\_\_\_\_

Name of Custom Designed Program: \_\_\_\_\_

Program Objective: \_\_\_\_\_

Visa Type (check one):  F-1  Other (please explain): \_\_\_\_\_

Number of Participants: \_\_\_\_\_ Number of Escorts: \_\_\_\_\_ Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Number of Program Weeks: \_\_\_\_\_ Class Hours per Day: \_\_\_\_\_ Class Days per Week: \_\_\_\_\_ Total Program Hours: \_\_\_\_\_

English Partner Interaction (check all that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> One-On-One Interaction:<br><input type="checkbox"/> Conversation Partner (UCI student)<br><input type="checkbox"/> Mentor (UCI teacher) | <input type="checkbox"/> Group Interaction (1 partner per 4-5 students):<br><input type="checkbox"/> Conversation Partner (UCI student)<br><input type="checkbox"/> Mentor (UCI teacher) |
|--|--|

## 3. Participants' Background

Age Range (must be at least 18 years of age): \_\_\_\_\_ to \_\_\_\_\_

Check the group(s) below where participants have taught:

	Primary/Elementary School	Middle/Junior High School	Secondary/High School	College/University
Public School				
Private School				
Teacher Trainers				

### 3. Participants' Background Continued

English Proficiency: TOEFL: \_\_\_\_\_ TOEIC: \_\_\_\_\_ IELTS: \_\_\_\_\_

Other Standardized Score (please explain): \_\_\_\_\_

Years of Teaching/Teacher Training Experience: \_\_\_\_\_ to \_\_\_\_\_

### 4. Educational Site Visits *(Check all that apply)*

**School**

Primary  Middle/Junior  Secondary

Public  Private

**Visit Type:**

Observation of classes in session

Prepare and present a cultural lesson

Other (please explain): \_\_\_\_\_

**UCI ESL Class Observation**

**Teacher Supply Store**

**Museums**

**Professional Conference Attendance**

**Other** (please explain): \_\_\_\_\_

### 5. Additional Academic Services *(check all that apply)*

Certificate of Completion (UCI logo and program name are included)

Final Comprehensive Project

Video Assessment of Teaching

Customized Graduation Ceremony

Textbooks

Official Transcripts

Other (please explain): \_\_\_\_\_

### 6. Recreational Activities *(check all that apply)*

Disneyland

Amusement Parks

Universal Studios

L.A. City Tour

Sea World

Other (please explain): \_\_\_\_\_

San Diego Tour

Shopping Malls

Local Beaches

Art/Musical/Cultural Event

Professional Sports Event

### 7. Housing and Transportation Services

**Accommodation:**  Off-campus Apartments  Homestay  On-campus Dormitory (summer only)  Hotel  None

**Transportation from Airport to UCI :**  Yes  No **Transportation from UCI to Airport:**  Yes  No

### 8. Additional Requests

If you would like additional arrangements, please explain: \_\_\_\_\_

\_\_\_\_\_