

\_\_\_\_\_ Date Submitted

**JA PROGRAM REQUEST FORM 2016-2017: High School**

Please return to the JA office via fax or e-mail (see below) by **June 10, 2016**.

**Note: Each class must have a completed registration form. If additional copies are needed please duplicate.**

**Teacher Information:**

I am:	<input type="checkbox"/> Returning <input type="checkbox"/> New <input type="checkbox"/> Retiring If retiring, would you like to be a JA volunteer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Last Name	
First Name	
Email Address	
School Phone	
School Name	
School Address	
Home Address	
Cell or Home Phone	
Contact me by	<input type="checkbox"/> Cell/Home Phone <input type="checkbox"/> Work Phone <input type="checkbox"/> Voice mail <input type="checkbox"/> Email <input type="checkbox"/> Fax
Send mail to	<input type="checkbox"/> Work <input type="checkbox"/> Home
Gender (statistical purposes only)	<input type="checkbox"/> Male <input type="checkbox"/> Female
Other Information (split grades, special needs students, etc.)	
Were you trained by JA?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Class Information:**

Grade	
JA Program	
Start Date of Program	
Semester	<input type="checkbox"/> Fall (Oct/Nov) <input type="checkbox"/> Winter (Dec/Feb) <input type="checkbox"/> Spring (March/May)
Total Number of Students	
Class Times & Day of Week Preferred	Morning: _____ <input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed Afternoon: _____ <input type="checkbox"/> Thurs <input type="checkbox"/> Fri
<b>JA ECONOMICS ONLY:</b> (indicate # of materials needed)	<input type="checkbox"/> Textbooks <input type="checkbox"/> Company Kit (one per class) <input type="checkbox"/> Study Guides <input type="checkbox"/> JA Titan License (one per class) <input type="checkbox"/> Teacher Guide
Frequency of Visits (Please check all that apply.)	My volunteer may come once a week ..... <input type="checkbox"/> Yes <input type="checkbox"/> No My volunteer may teach sessions in two days ..... <input type="checkbox"/> Yes <input type="checkbox"/> No My volunteer may teach sessions in one day..... <input type="checkbox"/> Yes <input type="checkbox"/> No
Program Events (Please check all that you would like information about.)	<input type="checkbox"/> Get Smart About Credit Day (in class program) – TBD <input type="checkbox"/> Ethics Day (in class program) – TBD <input type="checkbox"/> JA Titan Business Challenge (at YSU) – TBD <input type="checkbox"/> Financial Starting Points (at YSU) – TBD
Partnership Opportunities	Each year, the JA board determines the number of JA programs we can implement based on our budget for the year. We always have more requests from teachers than we have funding. Please check if you'd be interested in more information in having your school assist JA with our fundraising efforts. <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>JA OFFICE USE ONLY</b>	Class ID# : _____ Materials delivered: _____