



Junior Achievement®

of the High Plains

2016-2017

Teacher Class Registration

Please fill out the form and scan and send to dwatson@jahighplains.org

Or fax to: (806) 353-2390

Date _____

City _____

Campus Name _____

Grade level you teach Elementary Middle High

Room # _____

Gender Male Female

First Name _____ Last Name _____

Class Subject _____ Contact Phone _____

E-mail _____ Conference Period _____

Ethnicity: Hispanic Unknown Asian Multi-Racial American Indian/Alaskan Native
 Hawaiian/Pacific Islander White African American

Middle and High School Class Schedule

Zero _____
Time from-to

Number of Students _____

First _____
Time from-to

Number of Students _____

Second _____
Time from-to

Number of Students _____

Third _____
Time from-to

Number of Students _____

Fourth _____
Time from-to

Number of Students _____

Fifth _____
Time from-to

Number of Students _____

Sixth _____
Time from-to

Number of Students _____

Seventh _____
Time from-to

Number of Students _____

Eighth _____
Time from-to

Number of Students _____

Please fill in only the class periods hosting Junior Achievement