

Application for Dual Teaching Arrangement

This application must be completed by the school principal to request consideration of a Dual Teaching Arrangement. The completed application must be submitted to the Human Resources Director for consideration. A dual teaching arrangement must be reapproved annually, and applications are due to the Human Resources Director by the first Friday in April. Approval is at the discretion of the Director of Schools.

CERTIFIED EMPLOYEE INFORMATION Teacher 1: Name: Current Position/School: Years of Experience: Certification/Endorsement Areas: Teacher 2: Name: _____ Current Position/School: Years of Experience: Certification/Endorsement Areas: PROPOSED ARRANGEMENT DETAILS Grade/Subject for Dual Teaching Arrangement: Proposed Start Date: _____ Requested Schedule (if applicable): Example: Teacher 1 - M/W/F; Teacher 2 - T/Th **COORDINATION PLAN** The district will work with applicants to finalize the details of the arrangement, including expectations for planning, communication, and collaboration. Applicants should provide preliminary ideas below. **Instructional Responsibilities** Describe how instructional responsibilities will be shared (e.g., lesson planning, grading, etc.):

Parent and Staff Communication Describe the proposed approach to maintain consistent communication with parents and other staff members:	
Classroom Management Describe any preliminary thoughts on managing class	ssroom routines and discipline:
Professional Development and Collaboration Indicate how you will ensure alignment and collaboration	ration for professional growth and classroom goals:
Miscellaneous Information Use this section to provide any additional information circumstances regarding the Dual Teaching Arrange	
Principal Signature:	Date: