

HEA CO-OP

85271 Hwy. 25 ~ Franklinton, LA 70438
 985.796.8261 ~ 985.705.0939
 dionnemefford@gmail.com

Prospective Class Application

All spaces must be filled out ~ Applications with blanks will be returned to you for completion

| | | | |
|--|--------------|-----------|--------------|
| Date | First Name | Last Name | HEA Member # |
| Street Address | | City | State, Zip |
| Home Phone | Mobile Phone | E-Mail | |
| <u>Co-Teachers and/or Helpers ~ (you have already lined up)</u> | | | |
| Instructions: Circle one: H – for Helper or C – for Co-Teacher <i>(co-teacher must be equally responsible for planning and teaching lessons)</i> | | | |
| | Name | E-Mail | Phone |
| C | | | |
| H | | | |
| C | | | |
| H | | | |
| C | | | |
| H | | | |
| C | | | |
| H | | | |

Grade/Age Level (Please check boxes or circle appropriate grades or age levels for your class)
~Nursery, Pre-school, Pre-K, and Kindergarten classes are as listed ~ DO NOT CHANGE~

Nursery 0-1 year Nursery 2-3 years Pre-School/Kindergarten 4-5 years

1st 2nd 3rd 4th 5th 6th 7th 8th 9th 10th 11th 12th

Class Name: _____

Class Description: _____

Name of curriculum, textbook, or workbook required for this class: _____

Is this class Academic or Extra-Curricular? _____

Can the textbook be shared with siblings? Yes or No

Is there a prerequisite for this class? Yes or No If yes what is the prerequisite? _____

Maximum Number of Students: _____

Homework: (circle one) None <1hr/wk 1-2hr/wk 2-4hr/wk 4+hr/wk

Class Materials Fee: _____ Book Fee: _____ Total Fees: _____

Special Needs for your class: (TV, VCR, DVD, tables, chairs, white board, sink, etc. _____

If needed, would you be willing to teach this class a second hour? Yes or No

Which hour would be your first choice to teach? _____ Second Choice? _____

Is there any hour you cannot teach? _____

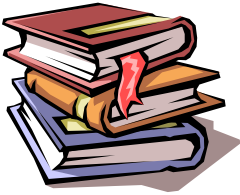
Additional information or requests: _____

**** Please note that every request will be taken into consideration when planning the class schedule for the upcoming semester. However, I cannot guarantee that every request will be granted. There are many things that fall into play and we will do our best to meet your needs.***

Thank you sharing the gifts God has given you to teach our children!!

Please mail all completed forms to:

**Dionne Mefford
HEA Co-op Director
85271 Hwy. 25 Franklinton, LA 70438
985.796.8261 ~ 985.705.0939
E-Mail: dionnemefford@gmail.com**



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Teacher Agreement

If my class is approved, then I understand and accept the following responsibilities.

1. To commit myself to the position of teacher for the HEA CO-OP.
2. To not teach anything that would be in direct conflict with the HEA Statement of Faith.
3. To notify the Co-op director two weeks prior to the start of co-op classes if unforeseen circumstances arise to prevent me from teaching the above class.
4. Classes will be held at First Baptist Church, Covington

Statement of Faith:

See the HEA Statement of Faith in the HEA membership application or on the web at www.tammanyhea.org

Each teacher at the HEA CO-OP volunteers their time in the unique and exciting opportunity to help shape young lives. We ask those who take a position of leadership (such as teaching) agree and adhere to the doctrinal beliefs of HEA.

All prospective class applications will be submitted to the co-op board for approval. The co-op board will then determine which classes will be offered in the fall and/or spring semesters of the co-op. The Co-op board's decisions are final.

I have read the above statements and the HEA Statement of Faith and I agree to adhere to, follow, and teach according to these beliefs.

Printed Name

Date

Teacher's Signature Required

If you have any questions regarding your application, please contact Dionne Mefford at 985.796.8261 hm. 985.705.0939 cell or by e-mail dionnemefford@gmail.com

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HEA Co-op Director
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