

## Application Form

# Free Spirit Publishing Advisory Council—Educators

To apply to be an advisor for Free Spirit Publishing, please complete all parts of this application and submit a current résumé. The information you provide will be kept confidential and used solely within Free Spirit.

### Personal Contact Information

Name \_\_\_\_\_ Date \_\_\_\_\_

Home address \_\_\_\_\_ City \_\_\_\_\_

State/Province \_\_\_\_\_ Country \_\_\_\_\_ Postal code \_\_\_\_\_

Phone \_\_\_\_\_ Email address \_\_\_\_\_

### Professional Contact Information

Job title \_\_\_\_\_ Current Employer \_\_\_\_\_

Work address \_\_\_\_\_ City \_\_\_\_\_

State/Province \_\_\_\_\_ Country \_\_\_\_\_ Postal code \_\_\_\_\_

Work Phone \_\_\_\_\_ Work email address \_\_\_\_\_

At which address (Home/Work), email (Home/Work), and phone number (Home/Work) should we contact you? (Please circle your preference for each.)

### Demographic Information

Gender: \_\_\_\_\_

Age:    \_\_\_ 18–20    \_\_\_ 21–30    \_\_\_ 31–40    \_\_\_ 41–50    \_\_\_ 51–    \_\_\_ 61+

Race (Check all that apply):

\_\_\_ American Indian/Alaska Native    \_\_\_ Asian/Pacific Islander    \_\_\_ African American

\_\_\_ Hispanic/Latin(x)    \_\_\_ White    \_\_\_ other: \_\_\_\_\_

## Education Background

Post-Secondary/College Degree(s):

Degree	Major/Concentration	Year	Institution
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you have a current teaching license/certificate? \_\_\_\_\_ From which state/province? \_\_\_\_\_

Please list any other relevant current licensure (e.g., counseling, social work, etc.), and the issuing state or province:

\_\_\_\_\_

## Educator Experience

If currently teaching, counseling, or working in school administration:

Grade level(s): \_\_\_\_\_ Racial and ethnic mix of students: \_\_\_\_\_

Please circle the choice that best describes the community in which you currently work:

Urban      Suburban      Rural      Small town

How many years of teaching, counseling, or administrative experience do you have at each of these levels? (Please indicate all that apply.)

Infant/Toddler     Preschool     PreK     Kindergarten  
 Grade 1     Grade 2     Grade 3     Grade 4     Grade 5  
 Grade 6     Grades 7–8     Grades 9–12     College     Adult

How many years of teaching, counseling, or administrative experience do you have in each of the following programs or institutions? (Please indicate all that apply.)

Child care center     Head Start     Early Head Start     Home school  
 Public school     Private school     Charter or alternative school  
 Outside of school-time program     College/University  
 Other school-related experience: \_\_\_\_\_

If not currently teaching, counseling, or working in school administration, please describe your past and current experiences working with children and/or adolescents. Feel free to attach additional sheets if necessary.

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To help us better understand your expertise and experience, check the topics below for which you have some understanding and experience. As appropriate, note specifics about any area of expertise.

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|--|--|--|
| <input type="checkbox"/> Adolescence                         | <input type="checkbox"/> Grief                   | <input type="checkbox"/> Stress                      |
| <input type="checkbox"/> Anger management                    | <input type="checkbox"/> Health & nutrition      | <input type="checkbox"/> Teaching strategies         |
| <input type="checkbox"/> Anxiety                             | <input type="checkbox"/> Inclusion               | <input type="checkbox"/> Technology                  |
| <input type="checkbox"/> Autism spectrum disorders           | <input type="checkbox"/> Leadership              | <input type="checkbox"/> Technology in the classroom |
| <input type="checkbox"/> Behavior/mental disorders           | <input type="checkbox"/> Learning differences    | <input type="checkbox"/> Trauma                      |
| <input type="checkbox"/> Brain theory                        | <input type="checkbox"/> Legal system/rights     |  |
| <input type="checkbox"/> Bullying                            | <input type="checkbox"/> LGBTQ                   | Curriculum Subjects                                  |
| <input type="checkbox"/> Character education                 | <input type="checkbox"/> Library/media           | <input type="checkbox"/> Foreign languages           |
| <input type="checkbox"/> Child development                   | <input type="checkbox"/> Media literacy          | <input type="checkbox"/> Language arts               |
| <input type="checkbox"/> Classroom management                | <input type="checkbox"/> Mindfulness             | <input type="checkbox"/> Mathematics                 |
| <input type="checkbox"/> Communication skills                | <input type="checkbox"/> MTSS                    | <input type="checkbox"/> Music & arts                |
| <input type="checkbox"/> Conflict management                 | <input type="checkbox"/> Opportunity/Achievement | <input type="checkbox"/> Physical education          |
| <input type="checkbox"/> Death and dying                     | <input type="checkbox"/> Gap                     | <input type="checkbox"/> Science                     |
| <input type="checkbox"/> Depression                          | <input type="checkbox"/> Parent involvement      | <input type="checkbox"/> Social studies              |
| <input type="checkbox"/> Differentiation                     | <input type="checkbox"/> PBS/PBIS                | <input type="checkbox"/> World cultures              |
| <input type="checkbox"/> Diversity                           | <input type="checkbox"/> Play/movement           |  |
| <input type="checkbox"/> Early childhood                     | <input type="checkbox"/> RTI                     | Other (specify):                                     |
| <input type="checkbox"/> Educational coaching/<br>Mentorship | <input type="checkbox"/> Safety                  | _____  |
| <input type="checkbox"/> ELL/ESL                             | <input type="checkbox"/> School success          | _____  |
| <input type="checkbox"/> Equity                              | <input type="checkbox"/> SEL implementation      |  |
| <input type="checkbox"/> Family relationships                | <input type="checkbox"/> Self-esteem             |  |
| <input type="checkbox"/> Friendships                         | <input type="checkbox"/> Service learning        |  |
| <input type="checkbox"/> Gender issues                       | <input type="checkbox"/> Sex & sexuality         |  |
| <input type="checkbox"/> Gifted & talented                   | <input type="checkbox"/> Social skills           |  |
|  | <input type="checkbox"/> Special education       |  |

## Open Response Questions

Please feel free to attach additional pages as necessary.

Please tell us more about your current professional focus and how you feel you can best contribute to the Advisory Council.

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Please tell us why you are interested in serving on the Advisory Council.

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If applicable, please list any writing you have had published and the publisher.

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Return this completed application form and a current résumé to:  
Advisory Council, Free Spirit Publishing, 6325 Sandburg Road, Suite 100, Golden Valley, MN 55427-3674  
or by email: [advisorycouncil@freespirit.com](mailto:advisorycouncil@freespirit.com).