



**PrintED INSTRUCTOR DATA FORM (DUPLICATE, IF NEEDED)**

Name \_\_\_\_\_ Title \_\_\_\_\_

Lead Instructor                       Instructor

School/Institution \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_ URL \_\_\_\_\_

Summer Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

**I. EDUCATION\***

Place a check in the appropriate box indicating your highest level of education.

- Credit hours for unearned undergraduate degree
- Technical Institute or Junior College Certificate
- Associate Degree
- Bachelor Degree
- Master Degree
- Doctorate

Documentation:\*

- Copy of diploma
- Copy of transcript attached for unearned undergraduate/graduate degrees
- Copy of Teaching Certificate

**PrintED OFFICE USE ONLY**

Reviewed by \_\_\_\_\_ Date \_\_\_\_\_

Total points earned \_\_\_\_\_ Approved:     Yes  No

Comments: \_\_\_\_\_

\* REQUIRED

**II. CONTINUING EDUCATION AND PROFESSIONAL DEVELOPMENT\***

List educational programs and courses attended that relate to graphics/printing sponsored by the state/county or related professional organizations (i.e. Litho Club, Craftsmen Club, etc.) within the past five years. Include Documentation (copy of certificate, roster, outline or brochure).

A. Institution \_\_\_\_\_  
Program/Course Title \_\_\_\_\_  
Dates attended \_\_\_\_\_ # of contact hours \_\_\_\_\_

- Course in graphics/printing related skills     Course in teaching related skills  
 Documentation attached

B. Institution \_\_\_\_\_  
Program/Course Title \_\_\_\_\_  
Dates attended \_\_\_\_\_ # of contact hours \_\_\_\_\_

- Course in graphics/printing related skills     Course in teaching related skills  
 Documentation attached

C. Institution \_\_\_\_\_  
Program/Course Title \_\_\_\_\_  
Dates attended \_\_\_\_\_ # of contact hours \_\_\_\_\_

- Course in graphics/printing related skills     Course in teaching related skills  
 Documentation attached

D. Institution \_\_\_\_\_  
Program/Course Title \_\_\_\_\_  
Dates attended \_\_\_\_\_ # of contact hours \_\_\_\_\_

- Course in graphics/printing related skills     Course in teaching related skills  
 Documentation attached

**III. ACHIEVEMENTS IN EDUCATION**

List your print/graphics related awards earned within the past five years including a brief description of the reason for the award.

A. Institution/Organization \_\_\_\_\_  
Title of Award \_\_\_\_\_ Date Received \_\_\_\_\_  
Purpose \_\_\_\_\_

B. Institution/Organization \_\_\_\_\_  
Title of Award \_\_\_\_\_ Date Received \_\_\_\_\_  
Purpose \_\_\_\_\_

\*REQUIRED

**IV. TEACHING EXPERIENCE\***

List positions beginning with your current/most recent teaching position.

A.  Full Time  Part Time

School \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Position \_\_\_\_\_ Dates \_\_\_\_\_ # of years \_\_\_\_\_  
Printing/Graphics Subject(s) Taught \_\_\_\_\_  
Academic Subjects Taught \_\_\_\_\_  
Supervisor \_\_\_\_\_ Title \_\_\_\_\_

B.  Full Time  Part Time

School \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Position \_\_\_\_\_ Dates \_\_\_\_\_ # of years \_\_\_\_\_  
Printing/Graphics Subject(s) Taught \_\_\_\_\_  
Academic Subjects Taught \_\_\_\_\_  
Supervisor \_\_\_\_\_ Title \_\_\_\_\_

C.  Full Time  Part Time

School \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Position \_\_\_\_\_ Dates \_\_\_\_\_ # of years \_\_\_\_\_  
Printing/Graphics Subject(s) Taught \_\_\_\_\_  
Academic Subjects Taught \_\_\_\_\_  
Supervisor \_\_\_\_\_ Title \_\_\_\_\_

**V. INDUSTRY EXPERIENCE**

List positions held in the printing/graphic communications industry.

A.  Full Time  Part Time

Title \_\_\_\_\_ Company \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Dates \_\_\_\_\_ Years \_\_\_\_\_  
Duties \_\_\_\_\_

B.  Full Time  Part Time

Title \_\_\_\_\_ Company \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Dates \_\_\_\_\_ Years \_\_\_\_\_  
Duties \_\_\_\_\_

\*REQUIRED

C.  Full Time  Part Time

Title \_\_\_\_\_ Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Dates \_\_\_\_\_ Years \_\_\_\_\_

Duties \_\_\_\_\_

**VI. INDUSTRY-RELATED MEMBERSHIPS\***

List current industry-related memberships in organizations such as Printing Industries of America, IGAEA, Printing Industries of America Affiliates, etc.

A. Association/Group Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Dates of membership \_\_\_\_\_

Documentation attached

B. Association/GroupName \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Dates of membership \_\_\_\_\_

Documentation attached

C. Association/GroupName \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Dates of membership \_\_\_\_\_

Documentation attached

**VII. PARTICIPATION IN GRAPHIC INDUSTRY-RELATED ORGANIZATIONS**

A. List participation on committees, task forces, or special projects within the past five years.

1. Committee/Activity \_\_\_\_\_

Member  Chairman  Officer Dates of membership \_\_\_\_\_

Documentation attached

2. Committee/Activity \_\_\_\_\_

Member  Chairman  Officer Dates of membership \_\_\_\_\_

Documentation attached

B. List service as an instructor, presenter, organizer, or panel member for seminars or other special events within the past five years.

1. Event/Activity \_\_\_\_\_

Organizer  Instructor  Panel Member Date \_\_\_\_\_ # of hours \_\_\_\_\_

Documentation attached

2. Event/Activity \_\_\_\_\_

Organizer  Instructor  Panel Member Date \_\_\_\_\_ # of hours \_\_\_\_\_

Documentation attached

\*REQUIRED

**VIII. CAREER DEVELOPMENT ACTIVITIES\***

Describe participation in career opportunities programs (e.g., SkillsUSA, career fairs, trade shows, technical updates, etc.) within the past five years.

Event \_\_\_\_\_  
 Organizer    Participant  
Sponsor \_\_\_\_\_ Date \_\_\_\_\_ # of hours \_\_\_\_\_  
Description \_\_\_\_\_

Event \_\_\_\_\_  
 Organizer    Participant  
Sponsor \_\_\_\_\_ Date \_\_\_\_\_ # of hours \_\_\_\_\_  
Description \_\_\_\_\_

Event \_\_\_\_\_  
 Organizer    Participant  
Sponsor \_\_\_\_\_ Date \_\_\_\_\_ # of hours \_\_\_\_\_  
Description \_\_\_\_\_

**SIGNATURES**

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*DIRECTOR/PRINCIPAL*

*DATE*

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*INSTRUCTOR*

*DATE*

THE ITEMS LISTED ABOVE ARE TRUE AND SUBMITTED AS VALIDATION OF MY EXPERIENCE AND DEDICATION IN PROVIDING QUALITY GRAPHIC COMMUNICATIONS/PRINTING EDUCATION.

**RETURN TO:** Graphic Arts Education and Research Foundation  
1899 Preston White Drive  
Reston, VA 20191

\*REQUIRED

***INSTRUCTOR INFORMATION AND DOCUMENTATION MUST BE SUBMITTED WITHIN NINETY DAYS OF RECEIPT OF APPLICATION.***