



ZETAC

ZUNI ENGAGING TEACHERS AND COMMUNITY

"A partnership of the Pueblo of Zuni and the W.K. Kellogg Foundation"

PARTICIPANT APPLICATION

Provide the following information:

Date of Application: _____

First Name: _____ Middle Name _____ Last Name _____

Mailing Address: _____

City _____ State _____ Zip Code _____

Email Address: _____ Cell Number: _____ Work Number: _____

Are you a (check one):

☐ Teacher Grade/Subject Area: _____ School _____

☐ Educational Assistant Grade/Subject Area: _____ School: _____

☐ Counselor ☐ Support Staff ☐ School Administrator

☐ Community Member Additional Information: _____

(Ei.- Employer, other.,)

Please check all that apply:

☐ Project Based Learning ONLY.

☐ Any professional development trainings/presentations provided by the ZETAC Program.

☐ Pursuing my educational goals to earn a BA/MA/Doctorate Degree

☐ I am licensed as a teacher with the State of NM and would like to continue my education to pursue a higher level degree for: _____ License #: _____

List all institutions of higher education you have attended and any degrees you have obtained:

Use extra space on the back if needed. Please attach transcripts.

Institution	Subject Area	Degree Obtained or # of Credit Hours Earned	Dates Attended

Indicate the educational program you are seeking through the ZETAC Program to meet your educational goals:

DEGREE PROGRAM OPTIONS:

- ☐ Undergraduate Degree with an Elementary Teaching License (K-8)
- ☐ Undergraduate Degree with a Secondary Teaching License (7-12) **
In the area of:
- ☐ Math ☐ English ☐ Science ☐ Social Studies ☐ Foreign Language
- ☐ Undergraduate Degree relating to other fields: _____
- ☐ Graduate Degree in Elementary Education (I currently have an undergraduate degree and teaching license.)
- ☐ Graduate Degree in Secondary Education (I currently have an undergraduate degree and teaching license.)
- ☐ Graduate Degree with K-8 Licensure (I have an undergraduate degree in something other than Education.)
- ☐ Graduate Degree with Secondary Licensure (I have an undergraduate degree in another area.)
- ☐ Licensure/Certification with NM PED: _____ (List Position)

Please answer the following questions regarding your interest in this program and your educational goals:

1. Please provide a summary of your educational goals.

2. What is your commitment to work within the community during and after you receive assistance from ZETAC?

3. The W. K. Kellogg Foundation provides grant funds to Zuni and other Native American community members. These Grant funds will support your educational goals by providing non-monetary assistance with online course fees, books, supplies and tuition scholarships (contingent upon available funding).

In addition, the program can assist you with obtaining your licensure/certification through NM Public Education Department Licensing Bureau on a reimbursement basis. However, there are no guarantees that we will receive continued funding from Kellogg past the grant period. Please indicate whether you are willing to continue your educational plan to obtain a degree and license/certification if the support ends.

ACKNOWLEDGEMENT:

I certify that all information provided is true and correct to the best of my knowledge. I understand that if approved as a participant, I am to provide a copy of any documents needed to determine my status as a ZETAC participant to attend professional development trainings and/or apply for the ZETAC Scholarship.

Signature

Date

Contact Information for the A:Shiwi College and Career Readiness Center:

Ms. Stacy Panteah

Phone: 505-404-9861

E-mail: stacy.panteah@ashiwi.org

Vanessa Sandoval

Phone: 505-782-6022

Email: vanessa.sandoval@ashiwi.org