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## APPLICATION FOR QUARKNET

A.1. Name Home Phone No. Home Address		P1	School none No. ddress	
E-mail		Zip		Zip
3. Number of years teach		s/physical science	<u> </u>	
4. What you will teach	n next year?	(include grade leve	el and level of o	course: AP, conceptual, etc.)
5. To what extent are days next school year		le for follow-up med	etings on week	xends and during released
B.1. Workshops you h What	ave taken ii	n the last five years: Where		Dates
	<del></del> -			
2. Describe what (if an other.	ything) you	ı have done that is i	nnovative for	a course, your school or
3. Formal Training:	Degree		Field	Year awarded
Number of formal cou	ırses in phy	sics		

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4. What research experience have you had?			
5. What research experience have you given your students?			
o. What research experience have you given your students.			
6. Describe what you have done (if anything) with particle physics in your classroom.			
7. Additional comments:			