



**TEEN TAKE HEART**  
**High School Science Teacher Institute Application**  
**July 21, 2008-August 1, 2008**

**KEEP THIS INFORMATION PAGE FOR YOUR REFERENCE**

The Hope Heart Institute will host a ten day institute for high school science teachers to work with research scientists and health professional to develop science curriculum. The goal of the curriculum is to use science as a motivator for students to make heart healthy lifestyle choices and expose students to science-related careers. The lessons will be structured to prepare students to meet Washington State Science Standards.

At the institute teachers will gain insight into how cutting edge research performed by scientists at The Hope Program at the Benaroya Research Institute impacts cardiovascular disease and how to treat it in the future. They will also work with health professionals to learn the intricacies of the cardiovascular system, its interrelatedness with other systems of the body and current treatment and clinical research available to patients. In an era of increasing obesity rates for children and teens and thus increasing risk factors for future cardiovascular and other diseases, The Hope's strategy is to design hands on science-based lessons to empower students to make the best lifestyle choices for them and their potential future families.

After completing the 10-days of the institute, participants receive

- \$1000 stipend
- 6 Seattle Pacific University continuing education credits
- A 3-ring binder of resources and a copy of curricular materials created in the Institute. Also, all the materials will be provided to teach the lessons

***Teachers serving schools with high diversity and/or a high percentage of students accessing free or reduced lunch programs are particularly encouraged to apply.***

**Institute Contact**

Please contact Christine Wieland (425) 456-8741 or e-mail [cwieland@hopeheart.org](mailto:cwieland@hopeheart.org).

Please mail, fax or e-mail electronic applications to:

Teen Take Heart

Christine Wieland

1380-112<sup>th</sup> Ave NE, Suite 200

Bellevue, WA 98004

Phone: 425-456-8741/Fax: 425-456-8701

[cwieland@hopeheart.org](mailto:cwieland@hopeheart.org)

**DEADLINE: June, 9, 2008**

Notifications of acceptance/denial will be mailed by June 16, 2008

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Name \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

Home E-mail Address \_\_\_\_\_

School District \_\_\_\_\_

School Name \_\_\_\_\_

School Address \_\_\_\_\_

County \_\_\_\_\_

School Phone (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_ School Fax (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

School E-mail Address \_\_\_\_\_

Is E-mail a good way to reach you this summer? Yes \_\_\_\_\_ No \_\_\_\_\_, if so, school or home? (please circle)

Certification Area (Endorsements)

\_\_\_\_\_

Current Course Taught \_\_\_\_\_

Grades \_\_\_\_\_

**Student Population-**Please list the percentage of your school population for each category.

\_\_\_\_\_ Native American/Alaska Native \_\_\_\_\_ Asian American

\_\_\_\_\_ African American

\_\_\_\_\_ Caucasian

\_\_\_\_\_ Hispanic/Latino

\_\_\_\_\_ Free or reduced Breakfast/Lunch

\_\_\_\_\_ Male

\_\_\_\_\_ Female

**Teaching Experience-** Please list most current position first.

School District/Other	Dates	Grades/Subjects Taught

**EDUCATION BACKGROUND**

Institution	Dates (years only) Enrolled	Area of Study

**Professional Development-** Please list science related professional development you have participated in over the past three years.

Course/Program	Institution/ Sponsor	Date

**Other Applicable Experience-** please share any other appropriate experience you may have such as work on teams, lesson creation or adaptation for your student population, experience in non-traditional educational setting.

Part of Teen Take Heart's purpose is to collect meaningful data regarding the impact of Teen Take Heart's curriculum to report to the Science Education Partnership Award (SEPA) funders on the effectiveness of the program and the positive influence in the classroom. To best evaluate the curriculum we ask that teachers agree to complete the ten-day institute, complete required homework and commit to piloting the newly created lessons in the classroom, and we ask teachers and students to complete anonymous and voluntary pre- and post-surveys.

**Workshop Commitment (Principal Signature required):**

If accepted to the Teen Take Heart Summer Teacher Institute, I agree to attend all ten days of the institute, complete all required homework and pilot the Teen Take Heart materials in my classroom during the 2008-2009 school year.

Signature \_\_\_\_\_ Date \_\_\_\_\_

I support the application of \_\_\_\_\_ for the Hope Heart Institute's **Teen Take Heart Summer Teacher Institute** in summer 2008 and related program commitments for the 2008-2009 school year.

Principal's  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**Hope Heart Institute Model Release Form**

I hereby grant permission to The Hope Heart Institute (HHI) and their representatives to take photographs or videos of me. I give HHI permission to use these images and recordings as well as my likeness as follows:

- The use may include reproduction, distribution, modification, display and performance.
- The use may be in composite or modified forms and in any media, now known or later developed, including without limitation, newspapers, television, radio, the internet and the World Wide Web.
- The use may be for any purpose throughout the world and in perpetuity, including without limitation, education, research, trade, advertising, and promotion.

I further acknowledge that I will not be compensated for these uses and that HHI exclusively owns all rights to the images. I waive the right to inspect or approve uses of the images or of any written copy. I hereby release HHI, its representatives and employees from any claims that may arise from the uses, including claims of defamation, invasion or privacy, or rights of publicity or copyright. This release is binding.

HHI is not obligated to utilize any of the rights granted under this agreement.

**If accepted to the 2008 Teen Take Heart Summer Teacher Institute, I agree to all of the *Participant Expectations* listed on page 3 and to the guidelines in the Model Release Form. This agreement expresses the complete understanding of the parties.**

Full Name (Please print.)			
Signature			
Address		City	State ZIP
Telephone number	Today's Date	Time	