

ATTHEA TEACHERS FELLOWSHIP – 2011 APPLICATION FORM

Family Name -----

First Name -----

Title Ms / Miss / Mrs / Mr (Circle appropriate)

Teaching Position in TAFE -----

Years of Teaching in TAFE -----

Name of TAFE (where you are teaching)-----

Campus Address -----

-----State-----Post code

Phone Number(work) -----

Fax Number (work) -----

Email (work) -----

Home Address -----

-----State-----Post Code

Signature of Applicant-----Date-----

To be completed by Faculty or Department Head.

I endorse----- (name of applicant) for the ATTHEA
Fellowship for 2011.

Signature----- Date-----

SEND TO: ATTHEA National Secretariat
 c/- Jenice Wheeler
 Adelaide City Campus TAFE SA
 120 Currie Street
 Adelaide 5000

Closing date: May 2011 No late entries will be considered.