



You MUST complete and return this form to reserve your class for this year!

Teacher Class Request Form

TEACHER INFORMATION:

First Name: _____ Last Name: _____

School Name: _____ Work Phone: _____

E-Mail: _____ Home Phone: _____

*Teacher Ethnicity:

White, not of Hispanic origin Asian Multi-Racial
 Black / African American American Indian / Alaskan Native Other: _____
 Hispanic / Latino Native Hawaiian / Pacific Islander

CLASS INFORMATION:	SCHEDULE PREFERENCE:
Grade level: _____ Total Students: _____	<input type="checkbox"/> Fall <input type="checkbox"/> Spring
*Number of students in each ethnic group:	
<input type="checkbox"/> White, not of Hispanic origin <input type="checkbox"/> American Indian / Alaskan Native	<input type="checkbox"/> September <input type="checkbox"/> January
<input type="checkbox"/> Black / African American <input type="checkbox"/> Native Hawaiian / Pacific Islander	<input type="checkbox"/> October <input type="checkbox"/> February
<input type="checkbox"/> Asian <input type="checkbox"/> Multi-Racial	<input type="checkbox"/> November <input type="checkbox"/> March
<input type="checkbox"/> Hispanic / Latino <input type="checkbox"/> Other: _____	<input type="checkbox"/> December <input type="checkbox"/> April
	<input type="checkbox"/> ANY <input type="checkbox"/> May

JUNIOR ACHIEVEMENT PROGRAM <i>(mark one):</i>	PAST VOLUNTEER(S):
<input type="checkbox"/> Ourselves (K) <input type="checkbox"/> JA America Works (6-8th)	Had a volunteer in the past?
<input type="checkbox"/> Our Families (1st) <input type="checkbox"/> † Economics for Success (6-8th)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure
<input type="checkbox"/> Our Community (2nd)	If so:
<input type="checkbox"/> Our City (3rd) <input type="checkbox"/> Success Skills (9-12th)	Name: _____
<input type="checkbox"/> Our Region (4th) <input type="checkbox"/> JA Titan (9-12th)	Company: _____
<input type="checkbox"/> Our Nation (5th) <input type="checkbox"/> Economics (10-12th)	
† New program ~ For a description of these programs, log on to www.jaadvantage.com	

Please **COMPLETE**, **SIGN**, and **RETURN** this form at your earliest convenience to Junior Achievement:

Fax to: **304-346-9754**, or mail to:

Junior Achievement
1700 MacCorkle Avenue, SE
Charleston, WV 25314

_____ (Signature)

If you have any questions, please call the JA office at 304-346-9753. Thank you!

* Optional, please refer to Junior Achievement's privacy policy at www.ja.org/about/privacy.shtml