

Workshop Leader Application for BIL 382 (Workshop Leader for students in the BIL 160 course)

Name:

Email:

Phone:

Address:

City:

State:

Zip:

Semester in which you completed BIL 160:

Professor with whom you took BIL160:

Your grade in BIL 160:

Your Overall GPA:

Have you ever been a workshop leader before:

For BIL 150? (Yes or No) If yes, semester:

For BIL 160? (Yes or No) If yes, semester:

Please indicate your anticipated class standing as of this coming semester:

_____ Sophomore _____ Junior _____ Senior _____ Other

Please describe any previous teaching/leadership experience you have had (e.g., camp counselor, resident advisor, swimming instructor etc.)

Briefly tell us why you would like to participate in the BIL 160 workshop program. If you wish, you *may* attach a separate letter.

To submit your application, please carefully read and follow the instructions below:

1. Save your completed application **with your last name added to the file name** (example: BIL160application_YOURLASTNAME)
2. Attach your application to the email, and send to Catherine Bravo
chb55@miami.edu