



LEONARD GELFAND  
STEM CENTER

**INTRODUCTION TO INNOVATION  
APPLICATION**

Name \_\_\_\_\_  
Last First Middle

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

Telephone (School) \_\_\_\_\_ (Cell) \_\_\_\_\_

Email \_\_\_\_\_

School \_\_\_\_\_ Grade(s) \_\_\_\_\_

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

I am applying as part of a school or grade level team that includes:

\_\_\_\_\_  
\_\_\_\_\_

**APPLICATION CHECKLIST**

- Resume which includes information stating your education and professional experience with relevant teaching history.
- Essay (300-500 words). Based on your experience, what are the most difficult scientific concepts for your students to grasp? What prior knowledge or misconceptions hinder their understanding of this material?
- Reference letter from principal supporting your participation in this program.

**CONTACT INFORMATION**

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**Applicants accepted on a first come, first served basis**

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