



# Arkansas Leadership Academy Assistant Principal Institute 2020 - 2021 Application

### Location and Dates

Winthrop Rockefeller Institute  
Session 1: October 12-14, 2020  
Session 2: February 4-5, 2021  
Session 3: April 13-14, 2021

**APPLICATION IS DUE BY AUGUST 31, 2020**

Submit to: [lisacook@uark.edu](mailto:lisacook@uark.edu) Subject: API Application

LAST NAME: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_ MIDDLE INITIAL: \_\_\_\_\_

HOME STREET ADDRESS: \_\_\_\_\_

HOME CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ HOME E-MAIL: \_\_\_\_\_

### **SCHOOL INFORMATION**

SCHOOL DISTRICT: \_\_\_\_\_

SCHOOL NAME: \_\_\_\_\_

WORK ADDRESS - STREET: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_ COUNTY: \_\_\_\_\_ PHONE: \_\_\_\_\_

WORK FAX: \_\_\_\_\_ WORK E-MAIL: \_\_\_\_\_

EDUCATIONAL SERVICE COOPERATIVE: \_\_\_\_\_

TOTAL YEARS AS AN ASSISTANT PRINCIPAL: \_\_\_\_\_

<u>DATES</u>	<u>SCHOOL / GRADE LEVEL</u>	<u>DISTRICT</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PLEASE CHECK THE ONE THAT MOST ACCURATLEY DESCRIBES YOUR SCHOOL'S CURRENT PERFORMANCE: LOW \_\_\_ MIDDLE \_\_\_ HIGH \_\_\_

CURRENTLY ASSISTANT PRINCIPAL OF THE FOLLOWING SCHOOL LEVEL:

ELEMENTARY: \_\_\_\_\_ MIDDLE SCHOOL: \_\_\_\_\_ OTHER (please specify): \_\_\_\_\_  
JUNIOR HIGH: \_\_\_\_\_ HIGH SCHOOL: \_\_\_\_\_ GRADE LEVELS SERVED \_\_\_\_\_

**Arkansas Leadership Academy  
Assistant Principal Institute**

**PLEASE ANSWER THE FOLLOWING QUESTIONS IN THE SPACE PROVIDED:**

WHY IS IT IMPORTANT FOR YOU TO PARTICIPATE IN THE ASSISTANT PRINCIPAL INSTITUTE?

WHEN YOU LOOK AT STUDENT TREND DATA IN YOUR SCHOOL OVER THE PAST THREE YEARS, WHAT DO YOU FIND?

WHAT DO YOU THINK ARE THE TOP THREE FACTORS (REASONS) THAT CONTRIBUTED TO THE RESULTS?

DISCUSS WHY YOU THINK SOME STUDENTS ARE NOT ACHIEVING AT YOUR SCHOOL.

**COMMITMENT:**

**ASSISTANT PRINCIPAL**

If selected to attend the Assistant Principal Institute, I understand that I am making a commitment for a one-year period.

**IN ORDER TO GRADUATE FROM THE ASSISTANT PRINCIPAL INSTITUTE, I AGREE TO PARTICIPATE IN THE THREE SCHEDULED RESIDENTIAL SESSIONS THROUGHOUT THIS INSTITUTE CYCLE. I UNDERSTAND THAT ATTENDANCE AT ALL SESSIONS IS MANDATORY.**

*Due to the volume of applications received, completing this application cannot guarantee placement in the program.*

ASSISTANT PRINCIPAL'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**PRINCIPAL**

IF \_\_\_\_\_ IS SELECTED TO ATTEND THE ASSISTANT PRINCIPAL INSTITUTE

- ◆ **I COMMIT TO SUPPORT HIM/HER THROUGH THIS ENDEAVOR**
- ◆ **I UNDERSTAND THAT HIS/HER ATTENDANCE AT ALL SESSIONS IS MANDATORY**
- ◆ **I UNDERSTAND THE SCHOOL DISTRICT WILL BE INVOICED FOR A \$1300.00 INSTITUTE FEE**

I CERTIFY THAT THIS CANDIDATE IS AN ASSISTANT PRINCIPAL AND HAS A TOTAL OF \_\_\_\_\_ YEARS EXPERIENCE AS AN ASSISTANT PRINCIPAL

I GRADUATED FROM MASTER PRINCIPAL INSTITUTE PHASE \_\_\_\_\_ IN \_\_\_\_\_ (YEAR)

PRINCIPAL'S NAME (please print) \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**SUPERINTENDENT**

IF \_\_\_\_\_ IS SELECTED TO ATTEND THE ASSISTANT PRINCIPAL INSTITUTE

- ◆ **I COMMIT TO SUPPORT HIM/HER THROUGH THIS ENDEAVOR**
- ◆ **I UNDERSTAND THAT HIS/HER ATTENDANCE AT ALL SESSIONS IS MANDATORY**
- ◆ **I UNDERSTAND THE SCHOOL DISTRICT WILL BE INVOICED FOR A \$1300.00 INSTITUTE FEE**

SUPERINTENDENT'S NAME (please print) \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**BILLING INFORMATION**

There is a \$1300.00 institute fee. Please indicate the email address for the point of contact for your invoice, along with your purchase order. **A full copy of your purchase order is required before application is considered complete.** Please do not remit payment until an invoice is received from the University of Arkansas Treasurer's Office.

PO#: \_\_\_\_\_

Name/Office: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_