

APPLICATION:



TEACH/INTERN IN CHINA 2013

Deadline: November 1, 2012

Please review the information about the	e Teach in China program on the Seattle Community Colleges
website: www.seattlecolleges.edu/teac	chinchina. The next intake for teachers/interns is February- July
2013. Applicants with Bachelor's degree	ees will be invited to apply for a Z Work visa. Applicants without
a Bachelor's Degree will apply for a F vis	sa under the Seattle Community Colleges-Buckland Group
•,	ed Interns, but will have similar responsibilities as the Z visa
group.	,
0 - 1	
Which campus are you studying at in th	e SCCD? North Central/SVI South
Which other college/university are you	studying at if not the SCCD?
willen other conege, university are you	studying at it not the SCCD:
Do you have a Bachelor's Degree? You	r answer will determine the visa type (Z or F) you will apply for to
enter China, in addition to some aspect	s of your contract/agreement with Buckland International.
Yes, I have a Bachelor's Degree	
☐ No, I do not	
Full Name (Last Name, First Name):	Date of Birth:
Tuli Name (Last Name, Thist Name).	Date of Birth.
Native Language:	Additional Languages and Fluency:
E-mail Address:	Phone Number:
E-man Address.	Phone Number.
Passport Number:	Expiration Date:
Education after High School (attach mos	st recent transcript; also write below dates, name of educational
institution and location, certificate or de	
institution and location, certificate or de	egree awarded).
Teaching Experience and degrees/certif	icates or qualifications, if any (dates, name of institution and
location, level & age group taught, hour	rs per week, courses taught):

Other Working Experience, if any (attach resume; also below list dates, location, duration, program/position):
Why do you want to teach in China?
Please describe any previous foreign travel experience.
Please describe in detail any previous teaching experiences (provide narrative account, not logistics/certifications/dates that were requested above).
Please describe experience you have working with children, including the type of work, duration and the ages of the groups of children.
What personal characteristics do you have that you feel will make you a strong teacher?





Teaching Preferences: Age group and Location

what age groups do you prefer working with:	
\square Primary school (7-12 yrs) \square Junior Middle School (13-15 yrs) \square	Senior Middle School (16-18 yrs)
Comments:	
Are you trying to be placed near family or friends in China? If yes, placed near family or friends in China?	ease explain.
Preferred location in China and city size, if known.	
Comments:	
□South □West □ East□ North□ Middle	Chengdu is West; Suzhou/Hangzhou
☐ large city ☐medium ☐ small city☐ rural ☐ I don't know!	are East; Wuhan is Middle; Guilin is South (Yangshou is near Guilin)
Beijing Tianiina Jinan Qingdi Xi'an Wuhan Chengdu Chongqing Three Gorges Kumming Guilin Guangzhou Shenzhen	<u>ao</u> njing n <mark>ghai</mark>
China Tour Map	

Work Permit Application Form (Chinese government form)

Completing this official form is a required component of the Chinese government for the application process

1. Full Name:		
2. Gender:		
3. Nationality:		
4. Passport Number:		
5. Place of Birth: Country	_ State	_ City
6. Date of Birth:		
7. Religion:		
8. Highest Degree:		
9. Specialty and hobby:		
10. Chinese Language Level:		
11.Full Mailing Address (please provide the any mail we might send to you for process)		ou will be able to receive
12. Phone Number:		
13. E-mail:		
14. Approximate entering China Date:		
15. Approximate residing China length:		
16. Did you work in China before?		

17. Will one or more of your family members be accompanying you to China? No Yes
If yes, please fill out his or her information:
Full Name:
Nationality:
Date of birth:
Gender:
Relationship to you:
18.
Category: Awards or Prizes
Have you received any awards or prizes for academic or professional performance in the past?
NoYes
Category: Research Projects
Have you conducted or assisted in conducting research in the past?
NoYes
Category: Publications
Have you published work in the past? No Yes
If yes to any of the 3 categories above, please fill out related information:
Title of the award/prize/research project/publication:
Category:
Date Received:
Country Received:
19. Have you received professional development/training in either in the past?
No Yes If yes, please fill out:
Name of the training program:

Name of the training institution:	
Training Length:	
Certificate: NoYes If yes, list the name of the certificate	
20. Do you have volunteering experience? No Yes	
If yes, please fill out related information:	
Name of the volunteer program:	
Volunteer length:	
Country you volunteered in:	
21. In which country will you be applying for your visa for entering China?	

Mandatory Participant Health Form

Buckland Group Teach in China program requires that candidates be in good physical condition. Please be completely honest in the information provided below. Travelling to developing countries with varying climates, food and other conditions can be very stressful. This travel and living situation can aggravate health conditions which you may be able to control at home. You will be required to have a mandatory physical upon arrival in China at your expense. It is a very thorough exam that is required of all incoming teachers. In addition, for applicants who have a Bachelor's degree and will be obtaining a Z visa, Buckland will send you a further Health form to complete and send back to them.

It is important that Buckland knows about any health conditions that might require accommodations of some type to keep you safe. The information you are being asked to provide below will be shared with Buckland Group and the Foreign Affairs Officer at the school you will be placed at in China on a need to know basis as it relates to the program requirements.

Participant Name:	Email:
Do you have any health issues that we should be a Please explain IF the health issues are not identified	
HEALTH NOTES (PLEASE BE THOROUGH AND EXPL	AIN ALL ISSUES)
Operations/Serious Injuries (w/ dates):	
Mobility or Physical Impairment Issues:	
Speech impediments (lisp, slur, stutter, strong	accent):
Chronic/Recurring Illness or Conditions:	
Mental Health Issues:	
Dietary Restrictions (food allergies, vegetarian	, vegan, kosher, etc):
HEALTH ISSUES (CHECK ALL THAT APPLY)	and give dates, if possible.
□ Frequent Ear Infections:	
□ Heart Defect/Disease:	
□ Convulsions:	
□ Diabetes:	
□ Bleeding/Clotting Disorders:	
□ Hypertension:	
□ Allergies of any type, including drug allergies	
	ed all necessary health information and that all information above nd that failure to fully disclose any health conditions may result in Group.

Date:

Signature:



LIABILITY RELEASE AND AUTHORIZATION FORM TO PARTICIPATE

Program Name: Buckland Group Teach English in China
Program Location: China
Program Sponsor: Buckland International Education Group
Program begins: February and ends: late June/early July
I have agreed to portioinate in an International Program anangored by the
I,, have agreed to participate in an International Program sponsored by the Seattle Community Colleges ("the College"), in collaboration with international host organizations, in
China from February 20 to July 20 ("the Program"). I understand and hereby acknowledge that my
participation in the Program is wholly voluntary. In consideration of being allowed to participate in the Program, I hereby agree as follows:
1) I hereby represent and warrant that I am and will be covered throughout the Program by a policy of comprehensive health and accident insurance which provides coverage for injuries and illnesses I sustain or experience overseas, and, more specifically, in the country in which I will be living and/or traveling

2) I understand that the College reserves the right to make changes to the Program itinerary at any time

or accommodation during the Program at least thirty (30) days prior to departure.

while on the Program in China. My insurance policy will also cover medical evacuation and repatriation of remains. I will either purchase the designated policy obtained for me by the College or show proof of purchase of a comparable policy. By my signature below, I certify that my health insurance policy will adequately cover me while outside the United States; and, I absolve the College, its employees, agents, and tour leaders of all responsibility and liability for any injuries (including death), illnesses, claims, damages, charges, bills and/or expenses I may incur while I am abroad. I agree to report to the College any physical or mental condition I have which may require special medical attention

and for any reason, with or without notice, and the College shall not be liable for any loss whatsoever to me by reason of any such cancellation or change. The College is not responsible for penalties assessed by air carriers that may result due to operational and/or itinerary changes, regardless of whether the College makes a flight arrangement. Any additional expense resulting from the above will be paid by me.

- 3) I understand and acknowledge that the College assumes no responsibility or liability, in whole or in part, for any delays, delayed or changed departure or arrival times, fare changes, dishonors of hotel, airline or vehicle rental reservations, missed carrier connections, sickness, disease, injuries (including death), losses, damages, weather, strikes, acts of God, circumstances beyond the control of the College, force majeure, war, quarantine, civil unrest, public health risks, criminal activity, terrorism, expense, accident, injuries, damage to property, bankruptcies of airlines or other service providers, inconveniences, cessation of operations, mechanical defects, failure or negligence of any nature howsoever caused in connection with any accommodations, restaurant, transportation, or other service or for any substitution of hotels or of common carriers beyond the College's control, with or without notice, or for any additional expense occasioned by any of the foregoing. If due to weather, flight schedules, or other uncontrollable factors I am required to spend additional nights, the College will not be responsible for my hotel, transfers, meal costs, or other expenses. My baggage and personal property are transported at my risk entirely. The College reserves the right to decline to accept or retain me in the Program at any time should my actions or general behavior impede the operation of the Program or the rights or welfare of any person. Similarly, if my conduct violates any policy or procedure of the College, I understand that I may be required to leave the Program in the sole discretion of the College's employees, agents, and representatives, and I may be referred to the appropriate College officials for further disciplinary or other action. In such an event, no refund will be made for any unused portion of the Program. The right is reserved by the College, in its sole discretion, to cancel the Program or any aspect thereof prior to departure; and, in the College's sole discretion to cancel the Program or any aspect thereof after departure, requiring that all participants return to the United States if the College determines or believes that any person is or will be in danger if the Program or any aspect thereof is continued.
- 4) I understand and hereby acknowledge that I have reviewed the U.S. Consular Information (http://travel.state.gov/travel/cis_pa_tw/cis/cis_1089.html), as well as the Centers for Disease Control information, on travel to, in and around China (http://wwwnc.cdc.gov/travel/destinations/china.aspx) that I am aware of and understand the risks and dangers of travel to, in, and around China, including but not limited to the dangers to my own health and personal safety posed by the use of public transportation in China, and by civil unrest, political instability, terrorism, crime, violence, and disease in China. I hereby assume, knowingly and voluntarily, each of these risks and all of the other risks that could arise out of or occur during my travel to, from, in, or around China. I release the Seattle Community Colleges, its officers, employees, and agents from all claims that may arise from my decision to participate in Buckland International Education Group in China's offer to teach in China, including any expenses incurred by me above, or physical injury that may occur to me as a result of my participation in this program.

5) I hereby acknowledge that I of this Agreement.	have read, understand and w	ill abide by each of the terms and conditions
Participant's name (print or type)	Participant's signature	Date (month/day/year)
-		nt the trip, regarding immunizations,
-	<u>must</u> secure health/medica	al insurance for the duration of travel and
study, and must select one of the	-	
☐ I will purchase the iNF approximately \$28/year.	EXT insurance policy throu	igh the SCCD (discounted rate of
I currently have, or will acquire before departure, medical insurance which includes international/overseas coverage, medical evacuation and repatriation of remains for the entire duration of my trip. I will provide proof of this insurance (name of insured, dates of coverage, statement of type of coverage) prior to December 1 st or I understand that I cannot participate in the program. Note: if you currently have this insurance, please submit the policy information at the time of application.		
Participant's signature:		Date:

hav	signature below verifies that all information I have provided in this application is true and correct, and that I e read and agree with all of the Terms & Conditions of this application and of joining the SCCD-Buckland ch in China Program.
Sign	ature of Applicant Date
	mplete applications include the following. Incomplete applications will not be accepted. You are couraged to apply early. APPLICATION FINAL DEADLINE: November 1, 2012
SEA	ATTLE ORIENTATION: Early December, full day Saturday
	Application Copy of your passport (picture and information page) 2 x 2 passport sized and style picture (front head view with blue or white background) Full photo (close up, entire person, not in a group) Resume (in Microsoft Word) Letter of Recommendation/Reference focused on your maturity, flexibility, professionalism, cross-cultural sensitivity and ability to live and work in another country Unofficial transcript (for those who have not earned a college degree) Copy of college level degrees, diplomas or teaching certificates Signed Release Statement \$50 application/orientation fee (non-refundable)
	ll pay the \$50 non-refundable application/orientation fee by:
□С	heck (check included) Please make your check payable to Seattle Community Colleges
Sea	redit Card I hereby agree that I have fully read and understand the payment account terms and that I authorize the Community Colleges to charge the specified credit card for payment of my Teach in China lication/orientation fee of \$50.
Nan	ne on CardSecurity Code (3 digits on back)
Caro	1 Type & Number Exp Date

Bring complete applications to your campus International Programs office (if you are a student of the SCCD) or mail/fax your application as soon as you have completed it. We do need official signatures so if you are emailing the form, please scan all of the signature pages. Do not apply until you have a passport. Also, when Buckland begins to correspond with you, please respond to their request for additional information immediately. Predeparture orientation will be held in early December.

Mail Application materials to:

Seattle Community Colleges—Teach in China Program Attn: Dr. Andrea Insley, Director, Global Initiatives

1701 Broadway, Seattle Washington 98122 Fax 206 934-3868

Questions?: andrea.insley@seattlecolleges.edu

Street address for handing in an application is 907 E. Pine Street (Capital Hill)