

Application Form for Participants  
MAA PProfessional Enhancement Program (PREP)  
2008 Workshops

The program costs as well as the costs of lodging during the workshop are covered by PREP. However, there is a registration fee for each workshop, and participants are responsible for their own transportation to and from the workshop site, as well as at least some portion of the cost of meals. Enrollment is limited so interested faculty are encouraged to apply early. A surcharge will be added to the workshop fee after the regular registration deadline. Payment (MasterCard, Visa, or check) must accompany application. For further information and registration deadlines, visit <http://www.maa.org/prep/2008>. If for any reason this workshop is cancelled, you will be notified by the registration deadline and you will receive a full refund of the registration fee. The MAA is not responsible for any fees you incur as a result of cancellation or changes in your travel arrangements. If you choose not to attend the workshop you must notify us prior the registration deadline. Cancellations made after this date are subject to a 50% administrative charge. For additional information, contact Jurgita Schwan by phone (202-319-8468) or email ([jschwan@maa.org](mailto:jschwan@maa.org)).

Please select the workshop you are applying to attend

Title of the Workshop \_\_\_\_\_

Date \_\_\_\_\_

Contact Information:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Current Institution: \_\_\_\_\_

Department: \_\_\_\_\_

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

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

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

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

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

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Institutional Information

Institution Type: \_\_\_\_\_ Public \_\_\_\_\_ Private

AMS Classification: \_\_\_\_\_ Two-Year \_\_\_\_\_ Bachelors \_\_\_\_\_ Masters \_\_\_\_\_ Ph.D. \_\_\_\_\_

Other \_\_\_\_\_

Participant Information

Number of years at current institution: \_\_\_\_\_ Number of years teaching: \_\_\_\_\_

Highest degree attained: \_\_\_\_\_ Ph.D. \_\_\_\_\_ Ed.D. \_\_\_\_\_ Masters \_\_\_\_\_ Year degree attained: \_\_\_\_\_

Degree subject: \_\_\_\_\_ Math \_\_\_\_\_ Statistics \_\_\_\_\_ Math Education \_\_\_\_\_ Other: \_\_\_\_\_

Job Title/Statue (e.g. Assistant Professor, non-tenured): \_\_\_\_\_

Highest degree institution: \_\_\_\_\_

Please tell us what you hope to gain from attending this workshop, and how you expect your participation to help you in the classroom and/or with other professional responsibilities.

Demographic Information (statistics used for NSF reporting purposes only)

Gender:  Female  Male      Age: \_\_\_\_\_

Race:  American Indian or Alaskan Native  Asian  Black or African American \_\_\_\_\_

Native Hawaiian or Pacific Islander  White/Caucasian

Ethnicity:  Hispanic or Latino  Not Hispanic or Latino

Dietary restrictions: \_\_\_\_\_

Disability Status:  None  Hearing Impairment  Visual Impairment \_\_\_\_\_

Mobility/Orthopedic Impairment  Other \_\_\_\_\_

Citizenship:  US Citizen  Permanent Resident  Other non-US Citizen

How did you hear about these workshops?

MAA Online  MAA Department Liaison  FOCUS advertisement/article \_\_\_\_\_

PREP Brochure  Department Chair  Listserv  Colleague \_\_\_\_\_

Other \_\_\_\_\_

Payment Information (must accompany application)

MasterCard  Visa

Name as it appears on credit card: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Personal Check  Institutional Check (when paying by check, application must be mailed)

Note: Your payment will not be processed until you receive notification from the MAA that you are invited to participate in the workshop. Notifications will be emailed approximately one week after the registration deadline.

To apply, fax to 202-483-5450, email to [jschwan@maa.org](mailto:jschwan@maa.org), or mail completed application form to:

The Mathematical Association of America

PREP 2008

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