

CONTINUING EDUCATION UNITS

PARTICIPATION VERIFICATION FORM

CONTINUING EDUCATION UNITS PARTICIPATION VERIFICATION FORM

Dear Close Up Teacher:

To earn Continuing Education Units (CEUs) from the Close Up Foundation, you must attend daily Teacher Program elements and get signatures from the Teacher Program Specialists using the correct Participation Verification Form for your program (see attached forms).

Teacher program elements include:

- Orientations and dinner Sunday night
- Monday morning Teacher Breakfast
- All-day programs on Monday and Tuesday
- All-day program on Wednesday for Middle School teachers
- All scheduled student-teacher meetings
- Capitol Hill day with your students (high school only)
- All-day program on Thursday for HS teachers (or Wed on Williamsburg weeks)

The TPS at your hotel will verify your participation in the Close Up Foundation Teacher Program at your Teacher Reflection Workshop. Please have your Participation Verification Form filled out with the names of the appropriate tracks/electives before this time. Close Up typically grants one CEU for every ten contact hours on program. However, different schools and districts often have their own rules concerning how CEUs are accepted. Close Up cannot guarantee that your particular school or district will recognize the professional development offered by our Teacher Program.

CONTINUING EDUCATION UNITS

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CONTINUING EDUCATION UNITS ENROLLMENT FORM

Please print clearly.

Name: _____

School: _____

School Address: _____

Home Address: _____

What week did you attend Close Up? _____

What hotel did you stay in? _____

Who was the Teacher Program Specialist for your hotel? _____

What course(s) are you teaching this school year? _____

Daytime Phone Number: _____

Email Address: _____

Please submit this form, along with your Participation Verification Form and your Close Up Teacher Schedule to pertinent school administration. For any questions or additional documentation, please contact:

Dr. Daniel A. Wallace
Director of Teacher Programs
Close Up Foundation
671 N. Glebe Road, Suite 900
Arlington, VA 22203
dwallace@closeup.org
703-706-3405

CONTINUING EDUCATION UNITS

PARTICIPATION VERIFICATION FORM

CONTINUING EDUCATION UNITS PARTICIPATION VERIFICATION FORM WASHINGTON HIGH SCHOOL / PROGRAM FOR NEW AMERICANS

NAME: _____

SCHOOL: _____

Program Component	Contact Hours	TPS Initials
Sunday Dinner and Orientation	1.5 hours	
Monday Breakfast and All-Day Elective _____	9 hours	
Tuesday All-Day Electives _____	8 hours	
Student-Teacher Capitol Hill Prep Meetings	1 hour	
All-Day Meetings on Capitol Hill	8 hours	
Thursday All-Day Elective _____	8 hours	
Teacher Reflection Session	.5 hour	
Total Hours =	_____ (36 total possible)	

Teacher Program Specialist Name & Signature: _____

Dates of Completion: _____

Submit this form, along with the Close Up Enrollment Form and your Close Up Teacher Schedule to pertinent school administration. For any questions or additional documentation, please contact Dr. Daniel A. Wallace, Director of Teacher Programs, at dwallace@closeup.org or (703) 706-3405.

CONTINUING EDUCATION UNITS

PARTICIPATION VERIFICATION FORM

CONTINUING EDUCATION UNITS PARTICIPATION VERIFICATION FORM WASHINGTON & PHILADELPHIA / WILLIAMSBURG / GETTYSBURG MIDDLE SCHOOL PROGRAM

NAME: _____

SCHOOL: _____

Program Component	Contact Hours	TPS Initials
Sunday Dinner and Orientation	1.5 hours	
Monday Breakfast and All-Day Elective _____	9 hours	
Tuesday All-Day Electives _____	8 hours	
All-Day Exploration of Philadelphia/Williamsburg/ Gettysburg	8 hour	
Teacher Reflection Session and Student Send-Off	1 hours	
Smithsonian Museum Exploration with Students _____	1.5 hour	
Total Hours =	_____ (29 total possible)	

Teacher Program Specialist Name & Signature: _____

Dates of Completion: _____

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CONTINUING EDUCATION UNITS

PARTICIPATION VERIFICATION FORM

CONTINUING EDUCATION UNITS PARTICIPATION VERIFICATION FORM WASHINGTON MIDDLE SCHOOL CORE PROGRAM

NAME: _____

SCHOOL: _____

Program Component	Contact Hours	TPS Initials
Sunday Dinner and Orientation	1.5 hours	
Monday Breakfast and All-Day Elective _____	9 hours	
Tuesday All-Day Electives _____	8 hours	
Teacher Reflection Session and Student Send Off	1 hour	
Smithsonian Museum Exploration with Students _____	2 hours	
Total Hours =	_____ (21.5 total possible)	

Teacher Program Specialist Name & Signature: _____

Dates of Completion: _____

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CONTINUING EDUCATION UNITS

PARTICIPATION VERIFICATION FORM

CONTINUING EDUCATION UNITS PARTICIPATION VERIFICATION FORM WILLIAMSBURG HIGH SCHOOL PROGRAM

NAME: _____

SCHOOL: _____

Program Component	Contact Hours	TPS Initials
Sunday Dinner and Orientation	1.5 hours	
Monday Breakfast and All-Day Elective _____	9 hours	
Tuesday All-Day Electives _____	8 hours	
Student-Teacher Capitol Hill Prep Meetings	1 hour	
All-Day Meetings on Capitol Hill	8 hours	
Thursday Williamsburg or Jamestown _____	8 hours	
Teacher Reflection Session	.5 hour	
Total Hours =	_____ (36 total possible)	

Teacher Program Specialist Name & Signature: _____

Dates of Completion: _____

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CONTINUING EDUCATION UNITS

PARTICIPATION VERIFICATION FORM

CONTINUING EDUCATION UNITS PARTICIPATION VERIFICATION FORM NEW YORK CITY PROGRAM WITH TEACHER SPECIALIST

NAME: _____

SCHOOL: _____

Program Component	Contact Hours	TPS Initials
All Day Exploration of NYC	8 hours	
All Day Exploration of NYC	8 hours	
Total Hours =	_____ (16 total possible)	

Teacher Program Specialist Name & Signature: _____

Dates of Completion: _____

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