



Program Request (please check one)

Please refer to the BHEC website and review all requirements for the workshop to which you are applying.

INTRODUCTORY PROGRAMS

Appalachian State University

Martin & Doris Rosen Summer Symposium, (Boone, NC)

The Bremen Museum

Summer Institute on Teaching the Holocaust (Atlanta, GA)

Facing History and Ourselves

Holocaust & Human Behavior (Memphis, TN)

U.S. Holocaust Memorial Museum

Belfer Conference, Language Arts (Washington, D.C.)

Belfer Conference, Social Studies (Washington, D.C.)

Other:

Name of Institution:

Name of Program:

ADVANCED PROGRAMS

Georgetown University

Jan Karski Institute for Holocaust Education
(Washington, D.C.)

Holocaust Educators Network

Memorial Library Summer Seminar (New York City)

Jewish Foundation for the Righteous

Summer Institute for Teachers (New York City)

Advanced Seminar (Newark, NJ)

European Study Program (Europe)

Holocaust & Jewish Resistance Teachers' Program (Europe)

Yad Vashem

International Seminar for Educators, (Jerusalem)

Personal Information

Name _____

Home Address _____

City/State/Zip _____

Home Phone _____ Cell Phone _____

Home Email _____

School Email _____

I am a member of the BHEC Teacher Cadre: YES NO

School Information

School Name _____

School Address _____

City/State/Zip _____

School Phone _____

General Teaching Experience

Please provide information beginning with the most recent and working backwards.

School 1 _____ Calendar Year _____

Grade Level _____ Subject (s) _____

School 2 _____ Calendar Year _____

Grade Level _____ Subject (s) _____

School 3 _____ Calendar Year _____

Grade Level _____ Subject (s) _____

If experience is more extensive, attach additional information.

Holocaust Teaching Experience

Please provide information beginning with the most recent and working backwards.

Number of years teaching the Holocaust _____.

School 1 _____ Grade Level _____ Calendar Year _____

School 2 _____ Grade Level _____ Calendar Year _____

School 3 _____ Grade Level _____ Calendar Year _____

*Please describe the content and any special experiences that were included in your Holocaust Unit.
(i.e. Student assignments, Field trips, etc.)*

Previous Holocaust Education Programs You Have Attended

Please include BHEC-sponsored workshops.

NOTE: Preference will be given to applicants who have participated in at least one prior BHEC program.

Workshop Name 1 _____ Date _____

Location _____

Workshop Name 2 _____ Date _____

Location _____

Workshop Name 3 _____ Date _____

Location _____

Required Essay

On a separate sheet of paper, please describe briefly (500 words or less) your reasons for requesting grant support to attend the Holocaust Education Workshop you have selected.

Principal Recommendation

*A recommendation from you Principal is required.
Please include this with your application by the application deadline.*

**All applications must be received in our office
by the deadline posted on our website: www.bhecinfo.org**

Signed and completed application should be mailed to:

*Birmingham Holocaust Education Center
P.O. Box 130805, Birmingham, AL 35213-0805
205-795-4176, info@bhecinfo.org*

Applicant's Signature _____ **Date** _____