

## Center for Dyslexia Studies

## Orton Gillingham Teacher Training Scholarship Application

In partnership with the Children's Dyslexia Centers and funded by the Scottish Rite Masons of New Jersey

Please Print					
DateMonth/Day/Year					
Name	First	N	Middle		
Address	City	State	Zip		
Telephone: Day	Telepho	Telephone: Evening			
Email					
Academic History					
Degree	Institution	Date	Major		
	Institution	Date	Major		
Other Credits					
Please submit a description of any total hours, coursework hours, pra					
2. Describe your teaching experience	e using a multisensory approach	to teaching reading, writing	and spelling.		

3. Why are you seeking this training?						
_	d a scholarship, may	we inform your school district a	nd provide them with furthe	er information?		
☐ Yes ☐ No						
School District						
Principal						
A -l -l						
Address	Street	City	State	Zip		
<ul> <li>Undergradua</li> <li>A current résu</li> </ul>	ite or graduate tra umé	nscripts				
E-mail all materi	als to: <b>graceh@fd</b>	<b>u.edu</b> or mail all information t	0:			
Ms. Grace Hotti Center for Dysle Fairleigh Dickins 1000 River Road Teaneck, New Je	exia Studies son University d, T-RH5-02					
Please select pref	erred practicum site	(if selecting more than one, plea	se rank in order of interest	(e.g., #1, #2)		
Bergen County:		Tenafly				
Bergen County:		Hasbrouck Heights				
Union County:		Plainfield				
Burlington County	y:	Westampton, NJ				
Atlantic County:		Northfield				

