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**GLOBAL CLASSROOM COLLABORATIVE APPLICATION**

**Eligibility**: Individuals eligible for awards are those holding board-appointed faculty rank who are members of the bargaining unit at the time that the GCCD applications are due. The support of the Department Chair must be provided. Funding is made available through Article 40.4 of the WMU-AAUP Contract.

Submit applications and questions to [michelle.metro-roland@wmich.edu](mailto:michelle.metro-roland@wmich.edu)

**APPLICANT INFORMATION**

|  |  |
| --- | --- |
| NAME |  |
| DEPARTMENT |  |
| FACULTY RANK |  |
| PHONE NUMBER |  |
| EMAIL |  |

**COURSE INFORMATION**

|  |  |
| --- | --- |
| COURSE NAME & NUMBER |  |
| ENROLLMENT |  |
| COURSE FREQUENCY |  |
| PROPOSED TERM TO TEACH THE GLOBAL CLASSROOM | SUMMER  FALL  SPRING |
| REQUIRED COURSE | YES  NO |
| WES COURSE | YES  NO |
| ARE MULTIPLE SECTIONS OFFERED? |  |
| COURSE DESCRIPTION |  |

**SHORT ANSWERS**

|  |  |
| --- | --- |
| 1. What is your motivation for creating a Global Classroom? |  |

|  |  |
| --- | --- |
| 2. What new knowledge and/or skills do you hope to gain from participation in the Global Classrooms Collaborative? |  |

|  |  |
| --- | --- |
| 3. How do you anticipate your students will benefit from participating in a Global Classroom? |  |

|  |  |
| --- | --- |
| 4. Previous international experience is not required but please describe any experiences working cross culturally that have prepared you to be successful working with an international partner. |  |
| 5. Please describe any previous experiences you have had with learning communities. |  |

**PARTNERSHIPS**

Participants in the Global Classroom Collaborative can work with an existing international partner or can be matched with one.

|  |  |
| --- | --- |
| I have an international partner. |  |
| Name of Partner |  |
| Country & Institution |  |

|  |  |
| --- | --- |
| I want to be matched with a partner. |  |
| List any regional or country preferences. \* |  |

**\*** Our partnership matching will try to meet regional/country preferences but is not guaranteed.

**ADDITIONAL MATERIALS**

PLEASE EMAIL THIS FORM AND THE FOLLOWING ADDITIONAL MATERIALS

|  |  |
| --- | --- |
| CV |  |
| COURSE SYLLABUS |  |
| CHAIR SUPPORT FORM |  |

Email to: [michelle.metro-roland@wmich.edu](mailto:michelle.metro-roland@wmich.edu)