



Solutions Extended Learning Activities

Jumpstart your day!

Notice of Opportunity Elementary Morning Extended Learning Activities Teachers

Description: We are seeking Certified Teachers and ESPs, currently employed in the Franklin Public Schools, who possess a special skill, talent or interest to share with our students. Activities take place before school, 7:15-8:15 AM, often in the teacher's classroom or other available space.

Previous activities offered have included Yoga, Morning Movement, Music, Art, Chess Club, Backyard Sports, Keyboarding without Tears, and More. All ideas are welcomed and encouraged!

Location: All six elementary schools in Franklin.

Reporting To: *Jennifer Maitland, Solutions Associate Director*

Schedule: Activities will run for one 8-week session and will meet one morning per week, 7:15AM-8:15AM. You choose the start date that works for you.

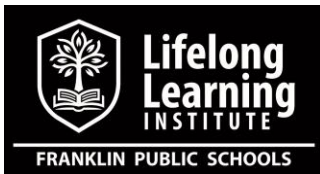
Compensation: \$390.00 stipend

Supplies: Please submit a list of supplies you will need to run your proposed activity. Due to life-threatening allergy/medical concerns, no food is to be served while activities are in session.

Application Procedure: Please print and complete the attached proposal form and send it via interoffice mail to: Jennifer Maitland, Solutions Program Office, Jefferson Elementary School. You may also email requested information to maitlandj@franklinps.net.

Appointment and compensation are contingent upon sufficient program enrollment. Generally, a minimum of 10 students are necessary to run an activity.

Date Posted: September 2019



Solutions Extended Learning Activities Activity Proposal

Your name

School

Name of your activity

Grade(s)

Activities will take place before school, 7:15-8:15AM. Day of the week you wish to teach, please circle one.

Monday

Tuesday

Wednesday

Thursday

Friday

Proposed class size (**Minimum is 10**) If your class size becomes larger than 25 students you will need another teacher to assist you with the activity.

Maximum number of students you will accept into your activity _____.

A brief description of the proposed activity to be included in the registration flyer

Proposed location within building in which you will teach the activity. _____

Date you wish to start the session: _____ Sessions will run for 8 consecutive weeks.

I understand that no food is to be served during activities due to life-threatening allergies/medical concerns. Initial _____

Signature of Teacher

Date

Signature of Principal

Date

This must be approved by the building principal prior to submitting proposal.