Part B: Letter of Intent

If accepted to the Scripps Fellowship Program, I ________________________ (print name) intend to participate fully in the program in agreement with the following terms.

1. The **2013/2014 Scripps Fellows Program** will start in June 2013 and terminate in one year.
2. The **Scripps Teacher Fellowship** provides a **Stipend** of $5,000 that will be paid in three installments (July 2013 – $3,500, December 2013 - $750, May 2014 - $750).
3. Each **Scripps Teacher Fellow** will be partnered with a **Graduate Fellow** (a science doctoral student from Scripps Institution of Oceanography) for a year-long curriculum development and implementation partnership. **Graduate Fellows** will spend approximately **10 hrs/wk** in the classroom of the **Partnering Teacher**.
4. **Scripps Teacher Fellows** will perform the responsibilities and activities listed above. Failure to participate in program activities or meet responsibilities may result in an adjustment of stipend at the discretion of program administrators.
5. This document is a non-binding agreement, meant only to assure awareness and acceptance of the terms of the **Scripps Fellowship**. Applicants will be notified of their status by April 12th, 2013. At that time, selected applicants will have the opportunity to accept a **Fellowship Offer Letter**.

_________________________________________    ____________________________________
Teacher Name                                                                                            School Name and District

_________________________________________    _______________
Teacher Signature                                                                                     Date

INSTRUCTIONS TO PRINCIPAL: Signing below indicates your consent to the above named teacher’s participation in the Scripps Fellows Program, under the responsibilities section. Please review this information before signing. You may wish to keep a copy for your records.

_________________________________________
School Principal Name

_________________________________________    _______________
School Principal Signature                     Date