



Incorporated Under New York State Education Law
P.O. Box 234
4950 Route 22, Suite 8
Amenia, New York 12501

ASSOCIATE APPLICATION

Please realize that we do not know you and can only judge your application on the information you submit.

I. Name _____ **Date** _____

Address _____

_____ Zip _____

Telephone #: Evening _____

Telephone #: Daytime _____

E-mail (if applicable) _____

Note: Unless otherwise indicated, upon your acceptance as an Academy member, your home telephone number and your e-mail address will be published in the Academy Directory.

II. Academic History (Begin with Highest Degree)

Degree _____ Institution _____ Date _____

Degree _____ Institution _____ Date _____

Degree _____ Institution _____ Date _____

Other credits _____

III. Orton-Gillingham Training

Course work, total hours _____
based on the Academy's curriculum at the Associate level.

Supervised practicum, total hours _____
based on the Academy's guidelines at the Associate level.

Principal trainer _____

Institution(s) _____

Address _____

from (date training program began) _____

to (date program completed) _____

IV. Related Training --programs derived from Orton-Gillingham, such as: Alphabetic Phonics, Herman, Project Read (Enfield & Greene), Slingerland, Spalding, Wilson, and others.

Program	Hours	Dates

V. Conferences/Workshops. Please **include dates**. Use a separate sheet if necessary.

VI. Orton-Gillingham Experience

List current supervising Fellow/AOGPE _____

List work as an Orton-Gillingham practitioner: Years _____ Months _____

Dates _____

Setting (including number of times per week, e.g., 2-5 times)

Number of students (1:1) _____ Age range _____

VII. Complete vita.

VIII. Brief statement including any additional information which might support your application.

IX. Complete Orton-Gillingham Lesson Plans with Profiles. Provide a profile for one student. Submit one annotated lesson plan for that student and photocopies of the lesson plan that preceded and the lesson plan that followed the annotated lesson plan so that the panel reviewing the application can get a sense of continuity as it relates to scope and sequence and diagnostic and prescriptive practice. Copies of work done by the student during the annotated lesson are to be included.

The **Profile** includes:

- a personal description of the learner, including age
- information about the learner’s cognitive functioning
- information about the learner’s academic achievement, including grade
- a sequence of Orton-Gillingham elements **and** approximate number of lessons taught prior to lesson submitted, and
- the scheduled length in minutes of each lesson **and** scheduled frequency of lessons.

The **Lesson plan** states a clear teaching objective based on the specific needs of the learner described in the profile, and:

- is detailed, specific, and prescriptive
- includes specific phonemes, graphemes, words, and sentences
- explains how you teach each section of the lesson, and
- includes copies of the student’s written work from **this** lesson (not a workbook page)

Please date the lesson **and** number it in the series of lessons for this student.

X. Letters of support from two persons who (1) are experienced **Orton-Gillingham** practitioners or educators, and (2) are directly familiar with your work as an Orton-Gillingham practitioner are required. **One** letter must be from your principal trainer. A support letter must use the *required form* the Academy provides for this purpose. The required form can be downloaded from the Academy’s website or obtained from the Academy’s office. Those providing support letters should personally send them directly to the Academy. It is the applicant’s responsibility to see that the required forms are used and are received by the Academy office no later than the deadline.

The Academy should expect to receive recommendation forms from:

- 1) _____
Last Name First Name Address
- 2) _____
Last Name First Name Address

Associate Member initial application fee: \$175 (includes \$45 nonrefundable fee)

BE SURE TO SUBMIT:

- The **Original Application** together with a copy of **ALL supporting documentation**, plus
- **Eleven (11) complete copies** of the application and **ALL supporting documentation**. (This totals 12 complete copies – the original and 11 copies). The Academy suggests you make an extra copy to keep for your records, as none of the materials you submit can be returned.
- **Application fee** payable to the Academy of Orton-Gillingham Practitioners and Educators.

MATERIALS SUBMITTED TO THE ACADEMY WILL NOT BE RETURNED.