



ENGINEERING TEACHER PROFESSIONAL DEVELOPMENT ENDORSEMENT (ETPDE)

Document #1: OFFICIAL PROGRAM SUMMARY

Follow the instructions in "Required Components for Endorsement Application" to complete this form.

Organization Name: _____

Application Contact: _____

Prefix: _____ First Name: _____ Last Name: _____

Street Address: _____ Apt/Unit #: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email: _____

Program Name: _____

Program Website: _____

Geographic Reach: _____

Frequency: _____

Duration: _____

Purpose: _____

Learning Objectives: _____

Engineering Content: _____

Engineering Pedagogy: _____

Program History:

Results to Date:

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____