



**Finger Lakes Community College  
Office of Concurrent Enrollment  
Gemini Program Instructor Application**

<b>Last Name</b>		<b>First Name</b>		<b>Middle Initial</b>	
<b>Address</b>	<b>Number</b>	<b>Street</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Telephone Number(s)</b>			<b>Social Security Number (necessary to create course in system)</b>		
<b>Email Address (work)</b>			<b>Email Address (home)</b>		

<b>FLCC Course(s) Requested:</b>	<b>Date Submitted:</b>
<b>School District:</b>	<b>Anticipated Start of Course:</b>

Have you ever taught a Gemini course(s) before?  Yes  No  
 If yes, what course(s) have you taught? \_\_\_\_\_

Have you ever taught at Finger Lakes Community College before?  Yes  No  
 If yes, what course(s) have you taught? \_\_\_\_\_

	<b>Name and Address of School</b>	<b>Course of Study</b>	<b>Years Attended</b>	<b>Diploma/Degree</b>
<b>High School Graduate?</b> Yes ____ No ____			<b>NA</b>	<b>NA</b>
<b>Undergraduate College</b>				
<b>Graduate/ Professional</b>				
<b>Other (Specify)</b>				

<b>Foreign Language Instructors Only:</b> Indicate all foreign languages you can speak, read and/or write.			
	<b>FLUENT</b>	<b>GOOD</b>	<b>FAIR</b>
<b>SPEAK</b>			
<b>READ</b>			
<b>WRITE</b>			

**Teaching/Employment Experience  
(Please begin with your current employer.)**

<b>Institution Name</b>	<b>Dates: From:</b>	<b>To:</b>
<b>Address</b>	<b>Courses Taught</b>	
<b>Telephone Number(s)</b>		

<b>Institution Name</b>	<b>Dates: From:</b>	<b>To:</b>
<b>Address</b>	<b>Courses Taught</b>	
<b>Telephone Number(s)</b>		

<b>Institution Name</b>	<b>Dates: From:</b>	<b>To:</b>
<b>Address</b>	<b>Courses Taught</b>	
<b>Telephone Number(s)</b>		

<b>Institution Name</b>	<b>Dates: From:</b>	<b>To:</b>
<b>Address</b>	<b>Courses Taught</b>	
<b>Telephone Number(s)</b>		

