

**Mini-Language Instructor:** 

## Saskatchewan Association of International Languages MINI-LANGUAGE LESSONS PROGRAM Mini-Language Instructor & Classroom Teacher Agreement

Please initial each requirement to show that you have read and understood each one. Return one copy of the signed agreement to SAIL as soon as possible. Both teachers must sign.

Full Name:	Phone Number:
	n time. If I cannot attend on one of my scheduled days, I will call the school and let v (the day before, if possible).
I will teac	h 8 hours in each classroom.
·	e all activities, handouts, and materials approved by the classroom teacher at least advance of each lesson.
I will comone.	plete a summary form for every lesson, and will have the classroom teacher sign each
I will fill o	out the evaluation form at the end of the program.
I will submaterial a	nit all receipts. I understand if I do not submit receipts, I will not receive the llowance.
	mit all lesson summary forms to SAIL Office. I understand that if I do not mit my forms on time, I will not receive my honorarium.
Classroom Teache	r:
Full Name:	Phone Number:
School Name:	Grade:
I will be p	resent for the entire duration of each lesson, and will actively participate in each one.
I will app	ove all activities, handouts, and materials before each lesson.
I will revi	ew and sign each lesson summary form.
I will fill o	out the evaluation form and will submit it at the end of the program.
MINI-LANGUAGE I	ISTRUCTOR'S SIGNATURE DATE
CLASSROOM TEAC	HER'S SIGNATURE DATE



