



**Mindful Learning**

*“Training for the Mind”*

## **Presenter Application**

**Send To: Mindful Learning, LLC  
11600 Welch Rd  
Dallas, TX 75229**

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**Applicant Name**

**Date**

*Mindful Learning is an equal opportunity employer and will not discriminate in any employment practice on the basis of race, color, religion, sex, age, disability, sexual orientation, or veteran status.*

### **Employment Process**

1. Complete Mindful Learning Application
2. Attach a resume to this application
3. Complete interview with Mindful Learning representative (phone or in person)
4. Complete and pass background check which will be conducted Mindful Learning to ensure safety
5. Complete all financial forms required before payment

### **Requirements for Employment**

1. Submit a proposal outlining the presenter's workshop/seminar
2. A record of leadership and professionalism
3. Employee must be in good standing with their respective school
4. Employee must feel comfortable presenting to Middle and Elementary School Teachers
5. Employee must be legally able to work in the United States

# Presenter Application

## Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_ *City State ZIP Code*

Phone: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Valid Drivers License? YES  NO  DL Number: \_\_\_\_\_

Have you ever been convicted of a felony? YES  NO

If yes, explain: \_\_\_\_\_

## Education

High School: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

College: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

## References

*Please list two professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

*Mindful Learning will ensure to protect the privacy of all past and present applicants. This information is only used for the required background check. All information will remain **CONFIDENTIAL**.*

## **Request for Presentation**

Name of Presentation:

Style of Presentation (circle one): Lab   Workshop   Lecture   Discussion

Approximate Time Required for Presentation (Hours):

Brief Summary (Briefly describe the nature of your presentation in relation to Science, Technology, Engineering, and Math):

What will participants gain from the presentation?

**ACKNOWLEDGEMENT OF RECEIPT AND CONSENT**

I have reviewed the TEACHER Code of Conduct (COC). I understand and agree that it is my responsibility to read and familiarize myself with the policies and procedures contained in this document.

I understand that the TEACHER COC serves as a guideline for my employment with Mindful Learning. I understand that I may be terminated at any time with or without cause or notice.

I hereby agree to give permission to Mindful Learning, as a condition of my employment, to conduct a background investigation. I hereby release Mindful Learning of all related liability that may occur as a result of a background investigation.

I hereby give Mindful Learning full permission to photograph, videotape, copyright, broadcast, reproduce, telecast or cablecast, use on the internet or intranet, publish or poses all photo or likeness of myself. I further release and relieve Mindful Learning from any liabilities, known or unknown which may arise out of the use of this material.

I understand that Mindful Learning has the right to add to, modify or delete provisions of the Mentor COC and the policies and procedures on which they may be based, at any time without advance notice. I understand that no oral statements or oral representations can in any way change or alter the provisions of the TEACHER COC.

I understand that the information contained in the COC is confidential, and I agree not to disclose it to anyone not employed by Mindful Learning.

I certify that statements I have made in this application are true, complete and correct to the best of my knowledge.

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_