Alberta International School Partnership Program

Application to partner with an Alberta school

1. **Contact information**

Name of School:

Address:

Country:

Telephone Number:

Facsimile Number:

Web address:

Name of Principal/Head teacher:

Name of school contact person (if not the Principal/Head Teacher):

Email address:

Telephone Number (if not the school’s telephone number):

1. **School Information**

|  |  |  |
| --- | --- | --- |
| GRADES | NO. OF STUDENTS | NO. OF TEACHERS |
| ECS |  |  |
| 1-3 |  |  |
| 4-6 |  |  |
| 7-9 |  |  |
| 10-12 |  |  |
| Other |  |  |
| TOTAL |  |  |

Please describe your school and its community below. This information will be passed on to potential partner schools. You may attach an additional page, if necessary.

|  |
| --- |
|  |

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Page 1 of 2

1. **Exchange Interests**

Can your students communicate in English or French?

Does your school have staff members that can communicate in English or French?

Are there people in the community who could assist with communication with the Alberta school? If so, who?

Please outline below any special interests or goals that you have for the international school partnership (i.e. curricular area of focus, student or teacher exchanges) and if you have specific requirements for a partner school (i.e. access to specific technologies). You may attach an additional page, if necessary.

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|  |

1. **Commitments and Approvals**

I/we affirm that this school has a genuine interest in developing an international school partnership and has an understanding of the commitment such an arrangement would entail.

School contact signature Date

Principal signature Date

Please return the completed form to:

Alberta International School Partnership Program

International Education Services Branch

Alberta Education

2nd floor, 10044 – 108 Street

Edmonton, Alberta T5J 5E6

CANADA

Fax: 1 (780) 644-2284

Email: [intl.ed.sec@gov.ab.ca](mailto:intl.ed.sec@gov.ab.ca)

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Page 2 of 2