

2025 ATA - Guatemala Change for Children Professional Development Project INTERNATIONAL COOPERATION PROGRAM

(A joint endeavour by the Alberta Teachers' Association and its members to provide professional development opportunities for teachers in Guatemala.)

Please note that the application is divided into two sections. Section A contains information of a general nature related to academic background and professional experience.

Section B asks for information of a more personal nature. Access to this information will be restricted to the selection committee, your team leader, and to the staff of the ATA's International Cooperation Program.

Please read the following before applying.

1. All applicants must
 - be a member in good standing of the Alberta Teachers' Association;
 - hold a valid teacher certificate;
 - have completed **at least three years of full-time teaching in Alberta before the overseas assignment commences**;
 - be a Canadian citizen;
 - be in excellent health and able to work in developing country conditions (a doctor's letter may be required);
 - show evidence of flexibility, mature judgment, and a strong willingness to put the team and project needs above personal needs; and
 - at the time of application, hold a Canadian passport valid for at least 6 months after the overseas assignment concludes. Note: Proof that a passport application has been made will be accepted
2. Most travel and living expenses for participants are covered by the Alberta Teachers' Association, however some pre-departure supplies, vaccination costs and some meals during travel to and from the location will be the responsibility of the participants. Participants are responsible to ensure that they have healthcare and medical coverage for the trip.
3. Travel to the host country will be **arranged by CFC** in accordance with the travel guidelines established by the ATA. These guidelines state: "efforts will be made to apply the lowest possible airfares for travel associated with the ATA Change for Children PD Project that are consistent with the objectives of the program." Consequently, CFC will arrange travel by the most direct and most economical route and will purchase, whenever possible, excursion air tickets with the limitations that apply to such tickets.
4. The goal of the exchange is to improve the quality of education available to marginalized children and young people in Guatemala through collaborating with teachers. The ATA teachers will assist with the professional development of teachers in the areas of bilingual education, technology for learning, climate change mitigation, Indigenous knowledge stewardship and other areas requested by the local teachers. Participants will learn about approaches and challenges to teaching in remote Indigenous communities and the critical role of education in development.

5. This professional development experience takes you to rural and remote communities in the Guatemala highlands. The team will have basic, simple, and secure accommodations and meals. Internet may be available, but most likely, participants will need to pay for additional data on their own for connectivity. For budgetary and safety reasons, it is the usual practice that participants share accommodation with one or more colleagues. For questions or concerns about the conditions of the trip, please Lorena@change4children.org.
6. Because of the nature of the project, participants are **not allowed** to be accompanied by friends or family during the Orientation program or during the placement overseas. Family and friends may travel with you before or after the ATA-CFC Exchange is complete.
7. Participants must accept that a project may be cancelled at the last minute due to unforeseen circumstances. In the event of cancellation, the ATA cannot guarantee placement on another overseas professional development project. If you cancel your participation within a month of the trip, you may be held responsible for the cost of the airfare and other expenses that have already occurred.
8. Participants are not permitted to drive a motorized vehicle during their stay abroad. Change for Children will be responsible for providing transportation in connection with the project.
9. It is expected that participants will share their experiences upon return to Canada. Participants are encouraged to speak at meetings of their teacher organization, community groups and school, and to participate in appropriate consultations and other events. Participants will be required to write an article about their experience and submit it for publication in the September/October ATA News.
10. This program will take place in July, 2025; however, the commitment to the ATA Guatemala PD Project begins March 1, 2025, as team members participate in orientation meetings, and work together to plan their work and prepare materials. There will be at least one in-person meeting and several virtual meetings, as well as on-going virtual communication.
11. Spanish language ability is an asset but not a requirement. However, the team will include at least some Spanish-speakers.
12. A selection process based on experience, skills, participation in the ATA, and potential contribution to the team will be used to identify applicants for virtual interviews. The final decision of the selection of participants will be made in mid-February, 2025. Applicants will be notified of the outcome of their application by the end of February.

2025 ATA Guatemala Professional Development Project

APPLICATION FORM FOR THE ALBERTA TEACHERS' ASSOCIATION
 Information on this form is collected on behalf of the Alberta Teachers' Association

- Please provide all information requested in the space assigned for each response. Incomplete applications will not be processed.
- E-mail the complete application to internationalcoop@ata.ab.ca.
- Your application must be received by midnight **January 15, 2025**.

SECTION A

Name: _____			<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Other
(First)	(Middle)	(Last)			
Name as it appears on your Canadian passport: _____			Level of Membership: Active Member of ATA <input type="checkbox"/>		
Passport expiration date: _____			Associate Member of ATA <input type="checkbox"/>		
PLEASE ATTACH A PHOTOCOPY OF PAGE 2-3 OF YOUR CANADIAN PASSPORT TO THIS FORM OR PROVIDE PROOF OF YOUR PASSPORT APPLICATION					
Date of birth: _____ <small>YY / MM / DD</small>			Age: _____		
Mailing address: _____		City: _____		Postal Code: _____	
Telephone: ()			Cell: ()		
Current workplace name: _____			Present Position: _____		
Address: _____		City: _____		Postal Code: _____	
Telephone: ()			Fax: ()		
Preferred e-mail: _____					

Please complete this page. Do not send a résumé or curriculum vitae.

ACADEMIC BACKGROUND (List most recent studies first.)

Name and location of teacher training institution or university and recent summer courses.	Dates	Degree/Certificate received	Major area of study

TEACHING BACKGROUND (List most recent assignment first, and indicate if you worked full-time, part-time or as a supply teacher.)*

*Days worked as a supply teacher may require written confirmation from school district.

School and location	Position (teacher, principal)	Grades taught	Subjects taught	Years	
				From	To

OTHER WORK EXPERIENCE (Do not list short-term or summer positions.)

Job title	Dates	Certificate or Qualifications required	Location

LINGUISTIC ABILITY

Rate your ability by selecting the appropriate level (from the dropdown box) on each category for each language:

English

Spanish



Oral Comprehension



Written Comprehension



Oral Expression



Written Expression



In what language did you complete your studies?

Secondary level: English French Spanish Other (specify) _____

University: English French Spanish Other (specify) _____

What is your first language? English French Spanish Other (specify) _____

In what language can you **competently** teach?

English French Spanish Other (specify) _____

SUBJECT PREFERENCES

Bearing in mind that you will likely be sharing both content and methodology with our overseas teacher partners, what subjects and levels would you feel confident teaching and in which language(s)? (We receive requests for teachers interested in teaching mathematics, English language arts, science, social studies and assistive technologies. Other topics in demand are classroom management, special education, assessment, physical education and health.)

Subject	Primary	Jr. High	High School	Language of Instruction		
				English	French	Other

EXPERIENCE IN ORGANIZATIONS

Outline your involvement in the Alberta Teachers' Association: (eg Specialist Council conference director, presented a session at teachers' convention, president of Economic Policy Committee)

Outline your involvement in other educational organizations:

INTERNATIONAL COOPERATION PROGRAMS

a. Have you ever participated in any international and/or intercultural cooperation programs designed to assist people?

Yes No

Overseas (specify countries, dates and nature of program):

In Canada (dates and nature of program):

List any other international and/or intercultural experience that you have had, including location(s), dates and duration of the experience(s):

SECTION B

PLEASE RESPOND BRIEFLY. **DO NOT ATTACH ADDITIONAL PAGES.**

a. Why do you wish to participate in the ATA Guatemala Professional Development Project?

b. Why do you think you are well suited to such an assignment?

c. What do you see as the responsibilities of the ATA Guatemala Professional Development Project team members?

d. In your opinion, what are some of the challenges of participating in such a project? How would you cope with these challenges?

e. What do you think the general aims and objectives of an International Cooperation professional development program should be?

f. On the ATA Guatemala Professional Development Project, it is important to put what is best for the project and your team before your own needs and wants. Please provide at least one example of when you have done so in the past.

g. Please describe any experience you have had facilitating workshops/courses:

h. Please describe how you would share what you learn through the ATA Guatemala Professional Development Project upon return to Canada.

i. How do you think your experience will change your professional practice? Your engagement within the Association?

EXTRACURRICULAR ACTIVITIES

j. Do you possess other training, experience or skills that could contribute to the success of the program (eg in a specific, sport, performing arts, etc)? Yes No

HEALTH

k. How would you assess your current level of health? (Poor) 1 2 3 4 5 (Excellent)

Participants are often exposed to extreme weather, less-than-perfect housing and sanitary conditions, unfamiliar diet and frequently long work hours. Access to medical facilities and care may not be available in some locations. Given these circumstances, do you believe that your present level of health would allow you to be a fully active participant in your team?

Yes

No

List any technical aids (cane, hearing aids, etc), or accessibility requirements (ramps, grab bars in washrooms, etc) you need, as well as food allergies or dietary restrictions you may have. Also indicate allergies or factors that we should be aware of prior to an overseas placement, such as sensitivity to malaria prevention or other medications, aversion to particular modes of travel, insects, etc.

Note: If you are selected you will be required to send a written confirmation of good health by your doctor.

REFERENCES

I authorize the Alberta Teachers' Association and the Change for Children ATA Professional Development Project in Guatemala coordinator to contact by phone the two persons listed below in order to determine my suitability to participate in this project.

1. Principal Assistant principal Superintendent

Name: _____ Work Phone: () _____
Email Address: _____
Mailing Address: _____ Cell Phone: () _____
City: _____ Postal Code: _____

2. Either

- (1) an Alberta Teachers' Association official at the provincial or local level or
- (2) someone in the field of education (such as a university professor or an official with Alberta Education) who can attest to your involvement in education and your suitability as an ambassador of Alberta teachers.

Name: _____ Work Phone: () _____
Position: _____
Email Address: _____ Cell Phone: () _____
Mailing Address: _____ Postal Code: _____
City: _____

SCHOOL BOARD

Name of present school board:

Address:

City:

Postal Code:

Telephone: () _____

Fax: () _____



The Alberta Teachers' Association

ACKNOWLEDGEMENT AND WAIVER

Please complete the English **OR** French Waiver

I, _____, acknowledge that international travel entails being exposed to a variety of risks and hazards depending on the country travelled to. I am aware that when traveling to other countries I may be exposed to contracting local illnesses, diseases or parasites that are rare or not present in Canada and that the available medical care may also be very different than in Canada.

Other countries may have markedly different physical climates, cultures, social conditions, legal systems and political situations than Canada's. I am aware that traveling to other countries may mean that I will be at greater risk of being the victim of violence, injury or death due to acts of crime, war, civil conflict or terrorism. I am also aware that by traveling to other countries I may be targeted, harassed, subjected to violence or subject to legal proceedings based on my race, religion, political views, sexual orientation, ethnic origin or other personal qualities or characteristics which do not create similar risks in Canada.

I have made my decision to travel in this program based on my own knowledge and evaluation of these risks. I have not relied on any information or advice from the Alberta Teachers' Association (ATA) for that decision. I acknowledge that it is and will remain my responsibility to inform myself of any risks associated with international travel.

I waive the right to advance any claim or action against the ATA or any of its agents, employees or officers for or by reason of any injury, damage or loss I may suffer during my time abroad in this program, even if that loss is caused or contributed to by the negligent act or omission of the ATA or any of its agents, employees or officers. I further undertake to indemnify, save and hold harmless and defend the ATA and any of its employees or officers with respect to any such claim or action.

Participants are expected to research the countries they intend to travel to, to consult with their general physician with respect to international travel and to consult the Government of Canada Travel Advisory service at <http://travel.gc.ca/travelling/advisories>. Participants are also advised to ask their insurance broker about forms of coverage including life insurance, disability insurance, medical insurance, kidnap and ransom insurance and any other forms of coverage available to help deal with the risks of international travel.

(Signature of Participant)

(Date)

(Signature of Witness)

(Date)



The Alberta Teachers' Association

ATTESTATION DE RECONNAISSANCE ET DE RENONCIATION

Je soussigné ou Je soussignée, _____, comprends et accepte que les voyages à l'étranger comportent divers risques et dangers selon le pays visité; que je suis conscient ou consciente qu'en voyageant à l'étranger, je m'expose à des maladies ou à des parasites rares ou non présents au Canada, et que les installations et services médicaux dans le pays d'affectation pourraient ne pas être de la même qualité ou aussi facilement accessibles qu'au Canada;

Je comprends et accepte que les autres pays peuvent présenter un climat, une culture, des conditions sociales, un système judiciaire et une situation politique radicalement différents du Canada; que je suis conscient ou consciente qu'en voyageant à l'étranger, je m'expose à un risque accru d'être victime de violence, de subir des blessures ou de trouver la mort en raison d'actes criminels ou terroristes, d'une guerre ou d'un conflit civil; que je suis également conscient ou consciente qu'en voyageant à l'étranger, je peux être pris pour cible, victime de harcèlement ou de violence, ou faire l'objet d'actions en justice en raison de ma race, de ma religion, de mes opinions politiques, de mon orientation sexuelle, de mon origine ethnique ou d'autres caractéristiques personnelles qui ne posent pas de tels risques au Canada;

Je reconnais que ma décision de voyager dans le cadre de ce programme se fonde sur ma propre connaissance et évaluation des risques. Je ne me suis fié ou fiée à aucun renseignement ou conseil de l'Alberta Teachers' Association (ATA) pour prendre ma décision. Je reconnais que la responsabilité de m'informer des risques associés aux voyages à l'étranger me revient, maintenant et à l'avenir;

Je comprends que l'ATA n'assume aucune responsabilité envers moi en ce qui a trait à toute réclamation, y compris, mais sans s'y limiter, aux réclamations pour perte, dommages ou blessure, tenant à mon séjour à l'étranger dans le cadre de ma participation à ce programme. Par conséquent, je m'engage à garantir, à défendre, à protéger et à dégager de toute responsabilité l'ATA, ses agents ou les membres de sa haute direction et de son personnel concernant toute réclamation que je pourrais avoir, y compris les pertes, les blessures ou les dommages causés, entièrement ou en partie, par un acte de négligence ou une omission de la part de l'ATA, ses agents ou les membres de sa haute direction et de son personnel.

Il est attendu que les participants se renseigneront au préalable sur les pays qu'ils ont l'intention de visiter, qu'ils consulteront leur médecin généraliste relativement aux voyages à l'étranger, et qu'ils consulteront la page du service Conseils aux voyageurs et avertissements (<https://voyage.gc.ca/voyager/avertissements>). Il est également conseillé aux participants de s'informer, auprès de leur courtier d'assurance, au sujet des formes de protection offertes, y compris l'assurance vie, l'assurance invalidité, l'assurance médicale, l'assurance contre les enlèvements et les demandes de rançon, et toute autre forme de protection pouvant pallier les risques liés aux voyages à l'étranger.

(Signature du participant ou de la participante)

(Date)

(Signature du témoin)

(Date)

Please complete the English **OR** French Waiver

ACKNOWLEDGMENT	
As an ATA Guatemala Professional Development Project applicant, I understand and accept the following conditions:	
1. I understand that every effort will be made to assign successful applicants in accordance with their skills and experience, but I am also aware that the nature of the requests from the host country may make this impossible.	<input type="checkbox"/> Yes
2. I am willing to accept the assignment in Guatemala.	<input type="checkbox"/> Yes
3. I understand that the ATA Guatemala Professional Development Project is a collaborative team effort and participants are expected to share accommodation while on assignment overseas.	<input type="checkbox"/> Yes
4. I understand that because of the nature of the ATA Guatemala Professional Development Project, I am not allowed to be accompanied by friends or family during the placement overseas.	<input type="checkbox"/> Yes
5. I attest that I am a Canadian citizen.	<input type="checkbox"/> Yes
6. I attest that I have taught full-time in Alberta for a minimum of three full years .	<input type="checkbox"/> Yes
7. I attest that I am currently a member in good standing of the Alberta Teachers' Association.	<input type="checkbox"/> Yes
8. I am in excellent health and able to work in developing country conditions.	<input type="checkbox"/> Yes
9. I demonstrate flexibility, mature judgment, and a strong willingness to put the team and project needs above personal needs.	<input type="checkbox"/> Yes
10. I understand that participants are not permitted to drive a motorized vehicle during their stay abroad.	<input type="checkbox"/> Yes
11. At the time of application, hold a Canadian passport valid for at least 6 months after the overseas assignment concludes; note - proof that a passport application has been made will be accepted.	<input type="checkbox"/> Yes
12. I have attached a copy of page 2-3 of my passport	<input type="checkbox"/> Yes
13. I have signed the attached Participant Acknowledgement and Waiver Agreement and remitted the signed original to the ATA.	<input type="checkbox"/> Yes
<p>14. I consent to the collection, use and disclosure of my personal information provided here to other International Cooperation participants by the Alberta Teachers' Association on behalf of Change for Children Association.</p> <p>I understand that any photos or videos I take during my time overseas can be used for ATA publications either in print or electronically.</p> <p>I consent to and understand that the Alberta Teachers' Association will use my personal information for the purpose of selecting Alberta ATA Guatemala Professional Development Project nominees.</p> <p>I consent to and understand that if I am selected as an Alberta nominee by the Alberta Teachers' Association, my personal information will be collected, used, and disclosed by the ATA for the purpose of</p> <ol style="list-style-type: none"> a. communicating with me about my involvement in this PD Pilot; b. administering all aspects of my assignment, travel, and return to Canada; and c. ensuring all regulatory and eligibility requirements related to my involvement in the PD Pilot are met. d. communication with other International Cooperation participants <p>I consent to the Alberta Teachers' Association's further collection, use and disclosure of additional personal information required to grant final approval to my application to participate in the ATA Guatemala Professional Development Project.</p> <p>I understand that the privacy officer of the Alberta Teachers' Association is available to answer my questions regarding the ATA's collection, use or disclosure of my personal information (1-800-232-7208 or 780-447-9400).</p>	
Date:	Signature:

ATTESTATION DE RECONNAISSANCE

En tant que candidate ou candidat à un programme du Projet outre-mer, je comprends et j'accepte les conditions suivantes:

- | | |
|--|------------------------------|
| 1. Je comprends qu'on fera tous les efforts possibles pour assigner aux candidates et candidats retenus une affectation conforme à leurs compétences et à leur expérience, mais que, vu la nature des demandes provenant du pays d'accueil, cela pourrait s'avérer impossible. | <input type="checkbox"/> Oui |
| 2. Je consens à accepter mon affectation au Guatemala. | <input type="checkbox"/> Oui |
| 3. Je comprends que le Projet de perfectionnement professionnel ATA-Guatemala repose sur le travail en équipe et que les bénévoles sont tenus de partager les logements pendant leur affectation à l'étranger. | <input type="checkbox"/> Oui |
| 4. Je comprends qu'en raison de la nature du Projet, les membres de la famille et les amis ne peuvent pas accompagner les bénévoles pendant le séjour à l'étranger. | <input type="checkbox"/> Oui |
| 5. J'atteste que j'ai la citoyenneté canadienne.. | <input type="checkbox"/> Oui |
| 6. J'atteste que j'ai enseigné à temps plein pendant trois années complètes en Alberta. | <input type="checkbox"/> Oui |
| 7. J'atteste que je suis présentement membre en règle de l'Alberta Teachers' Association (ATA). | <input type="checkbox"/> Oui |
| 8. J'atteste que je jouis d'une excellente santé et que je peux travailler dans les conditions propres aux pays en développement. | <input type="checkbox"/> Oui |
| 9. J'atteste que je ferai preuve de souplesse, d'un bon jugement et d'une volonté ferme de placer les besoins de l'équipe et du projet avant mes besoins personnels. | <input type="checkbox"/> Oui |
| 10. Je comprends qu'il est interdit aux participants de conduire un véhicule motorisé pendant leur séjour à l'étranger. | <input type="checkbox"/> Oui |
| 11. J'atteste détenir, au moment de déposer ma demande, un passeport canadien valide pendant au moins 6 mois suivant la fin de mon affectation dans le cadre du Projet (notez qu'il est possible de répondre à cette exigence en fournissant la preuve du dépôt d'une demande de passeport). | <input type="checkbox"/> Oui |
| 12. J'ai signé l'Attestation de reconnaissance et de renonciation (ci-jointe) et j'en ai remis la version originale signée à l'ATA. | <input type="checkbox"/> Oui |
| <p>13. Je consens à la collecte, l'utilisation et la divulgation par l'ATA, au nom de la Change for Children Association, des renseignements personnels fournis dans le présent formulaire.</p> <p>Je comprends que toute photo prise ou vidéo captée pendant mon séjour à l'étranger pourrait être utilisée dans les publications imprimées ou électroniques de l'ATA.</p> <p>Je comprends et je consens à ce que l'ATA utilise mes renseignements personnels afin de sélectionner les candidates et candidats de l'Alberta qui seront invités à participer au Projet de perfectionnement personnel ATA-Guatemala.</p> <p>Advenant ma sélection à titre de candidat de l'Alberta par l'ATA, je comprends et je consens à la collecte, l'utilisation et la divulgation de mes renseignements personnels par l'ATA pour :</p> <ul style="list-style-type: none"> a. communiquer avec moi au sujet de ma participation à ce projet pilote; b. administrer tous les aspects de mon affectation, y compris mes déplacements et ma rentrée au Canada; c. assurer que toutes les exigences réglementaires et d'admissibilité relatives à ma participation à ce projet pilote sont satisfaites. <p>Je consens à la collecte, l'utilisation et la divulgation par l'ATA de renseignements personnels additionnels nécessaires à l'approbation finale de ma demande de participation au Projet de perfectionnement professionnel ATA-Guatemala.</p> <p>Je comprends que l'agente ou l'agent de la protection de la vie privée de l'ATA est disponible pour répondre à mes questions concernant la collecte, l'utilisation et la divulgation de mes renseignements personnels par l'ATA (1-800-232-7208 ou 780-447-9400).</p> | <input type="checkbox"/> Oui |

Date:

Signature:

INTERNATIONAL COOPERATION PROJECTS OTHER THAN THE ATA GUATEMALA PROFESSIONAL DEVELOPMENT PROJECT

The ATA is involved in a number of International Cooperation projects other than the ATA Guatemala Professional Development Project. From time to time teachers are needed to assist with these projects in similar capacities. If you are interested in being considered for such work, please sign below to confirm your willingness to keep your file active with the Association for a period of one year from the date your application was received.

I would like to keep my file active with the Association for a period of one year, in order to be considered for International Cooperation projects other than the ATA Guatemala Professional Development Project within this time period. I understand that my personal information will remain confidential and will be used for the sole purpose of such initiatives.

SAVE

PRINT