1310 Main Avenue South, Suite 109 Brookings, SD 57006 website: sdyouthfoundation.org

email: info@sdyouthfoundation.org phone: (605) 692-8705

Teens as Teachers—PARTNERSHIP AGREEMENT

Teen Teacher Name _____School _____

One key component of a teaching experience is the partnership formed with other			
teachers, administrators, and program directors. Your adviser/community coach will help identify the people whose permission you need to complete this teaching experience. Once you have			
 Contact partners 			
 Explain what you will be doing and why you wish to be part of the experience. 			
 Identify them in the chart below and obtain their signature. 			
 You will need a minimum of one partner. 			
	T		
Partner Name	Position	Email Address	Signature
			o o
Teen Teacher Signature:			
Adviser/Community Coach Signature			



HELPING YOU DO GOOD FOR YOUTH IN YOUR COMMUNITY!

