

Application Form

Spring Workshop: Music & Culture in African Life
African Studies Program
March 28, 2009

Name: _____

Phone: _____ **E-Mail:** _____

Address: Home: _____ **Work:** _____
_____ _____
_____ _____

School: _____

Subjects Taught: _____

Grade Taught: _____

Length of Time Teaching: _____

Are you currently including topics about Africa in lesson plans? Yes / No
If yes, under what topics?

Have you taken any course or participated in any workshops relating to Africa?

What would you like to gain from the workshop?

Are there any specific topics you would like to see covered?

Would you like graduate credit for the workshop? Yes / No

Are you interested in child care during the workshop? Yes / No

If so, what are the ages of your children? _____

Please return application to Dr. Osita Afoaku at afreach@indiana.edu or :

c/o Angela Scharfenberger
Outreach Assistant
African Studies Program
221 Woodburn Hall
Indiana University
Bloomington, IN 47405