



**College of Education
Project Cruise Application for Participation**

Name & Address: _____

Personal E-mail: _____

Phone (H) _____ Phone (C) _____

We agree to provide participants with:

- 1) A stipend of \$1,000 twice yearly (a maximum of \$4,000 per participant)
- 2) Reimburse \$500 expenditures for approved professional development activities per year (a maximum of \$1,000 per participant)

If you participate in Project CRUISE you agree to:

- 1) Make satisfactory progress in the Alternative Masters Degree Program in Collaborative Special Education at the University of South Alabama.
- 2) Attend all supplemental workshops and meetings.
- 3) Teach in the area of special education in the Mobile County for a minimum of three years.

Note: All Project CRUISE Participants understand that data related to participation may be used in published and unpublished reports and that these data will be masked such that no individual or program site is identifiable.

Applicant signature: _____ Date _____

For more information contact:
Dr. Marilyn McGowan
Department of Leadership and Teacher Education
UCOM 3101
Mobile, AL 36688
Phone 251-380-2761
E-mail: cruise@usouthal.edu
Web site: <http://projectcruise.southalabama.edu>