



**Adventures in Alice Programming**  
**Summer 2008**  
**College of Charleston**  
**Application**

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Name:

Email:

Mailing address:

Phone number:

About your teaching position:

School:

District:

Subject area:

Grades:

Do you have the support of your school administration to teach Alice as a course or course component during the 2008-09 academic year?

If not, who can we contact to help garner support?

On a separate sheet, please include a short explanation of why you want to teach Alice at your school. (Please limit to a one-sided page.)



Please return to

RoxAnn Stalvey • Department of Computer Science • College of Charleston • 66 George Street • Charleston SC 29424  
stalveyr@cofc.edu

or

Madeleine Schep • Columbia College • 1301 Columbia College Drive • Columbia SC 29203  
mschep@colacoll.edu