

School name:

Address:

Contact information:

- Host School Requests for School Year (dd/mm/yyyy-dd/mm/yyyy)												
Name of Contact person/Position at the school/contact information	Name of School	School / Student Level	Candidate qualifications & Required documents	Number of requested Teacher/TA	Brief (itemized) Job Description & Working Hours per week	Academic Term (dd/mm/yyyy-dd/mm/yyyy)	Application deadline	Age (Optional)	Gender (Optional)	Housing/Meals	Monthly cash stipend	Other Fees Teacher/TA is responsible for

Please complete this form and return it to: Taipei Economic and Cultural Office in Chicago

Education Division
55 W Wacker Dr., Suite 1200
Chicago, IL 60601
(312) 297-1325

<https://depart.moe.edu.tw/CHICAGO/Default.aspx>