



**Saskatchewan Organization for Heritage Languages  
 MINI-LANGUAGE LESSONS PROGRAM  
 Heritage Language Instructor &  
 Classroom Teacher  
 Agreement**

Please initial each requirement to show that you have read and understood each one.  
 Return one copy of the signed agreement to SOHL as soon as possible. Both teachers must sign.

**Heritage Language Instructor**

Full Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

\_\_\_\_\_ I will be on time. If I cannot attend on one of my scheduled days, I will call the school and let them know (the day before, if possible).

\_\_\_\_\_ I will teach 8 hours in each classroom.

\_\_\_\_\_ I will have all activities, handouts, and materials approved by the classroom teacher at least one day in advance of each lesson.

\_\_\_\_\_ I will complete a summary form for every lesson, and will have the classroom teacher sign each one.

\_\_\_\_\_ I will fill out the evaluation form at the end of the program.

\_\_\_\_\_ I will submit all receipts. I understand if I do not submit receipts, I will not receive the material allowance.

\_\_\_\_\_ **I will submit all lesson summary forms by March 22<sup>nd</sup>. I understand that if I do not submit my forms on time, I will not receive my honorarium.**

**Classroom Teacher**

Full Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

School Name: \_\_\_\_\_ Grade: \_\_\_\_\_

\_\_\_\_\_ I will be present for the entire duration of each lesson, and will actively participate in each one.

\_\_\_\_\_ I will approve all activities, handouts, and materials before each lesson.

\_\_\_\_\_ I will review and sign each lesson summary form.

\_\_\_\_\_ I will fill out the evaluation form and will submit it at the end of the program.

\_\_\_\_\_  
 HERITAGE LANGUAGE INSTRUCTOR'S SIGNATURE

\_\_\_\_\_  
 DATE

\_\_\_\_\_  
 CLASSROOM TEACHER'S SIGNATURE

\_\_\_\_\_  
 DATE