**1. GENERAL INFORMATION**

Name:

Address:

City: State: Zip Code:

Phone: Email Address:

**2. AFFILIATION**

School District:

*Constituency Group:*

Administrator of Federal Programs

District Administrator

Teachers ( Public School or  Charter School)

Principal or School Leader ( Public School or  Charter School)

Parents

School Board Member

Private School Representative

**3. AREAS OF EXPERTISE**

*Please select your area(s) of expertise:*

General Title I Management  Other Federal Programs

Classroom instruction  State Standards

Assessment  Program Evaluation

Title I Fiscal Requirements  Parent and Family Engagement

Professional Development  Other (*Please specify*):

**4. WHY DO YOU WISH TO SERVE ON THE STATE TITLE I COMMITTEE OF PRACTITIONERS?**

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**5. DESCRIBE HOW YOUR BACKGROUND AND PERSPECTIVE WILL BENEFIT TITLE I PROGRAMS IN THE STATE OF WYOMING.**

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**6. CAN YOU COMMIT TO ATTENDING AT LEAST TWO FACE TO FACE MEETINGS DURING THE COURSE OF THE YEAR?**

Yes  No

Signature Date

**Application Deadline:** Applications with a current résumé must be received by close of business December 15, 2017. Please email the applications and résumé to [**jon.lever@wyo.gov**](mailto:jon.lever@wyo.gov) or send to:

Jon Lever, Title I Program Manager

Wyoming Department of Education,

2nd Floor Hathaway Building

2300 Capitol Ave

Cheyenne, WY 82001