Statement of Interest in MontTELLs (Montana Teachers of English Language Learners) Grant Project



	1.	Name: Home address:				
		Phone at work: Cell Phone:				
		Email: Work-		Home-	-	
		Please circle yo	our preferred contact metho	od: cell phone	: cell phone work phone email	
	2.	Grade(s) and Subject(s) you currently teach: Please circle the school where you teach (the MontTELLs Grant Project requires that you teach at the 6 th grade through high school levels):				
		CMR HS	North MS	Arlee	Rocky Boy	
		Great Falls HS	East MS	Poplar	Box Elder	
		Hardin HS	Hardin MS	Browning	Crow Agency School	
		Lame Deer HS	Lame Deer MS	Heart Butte	N. Cheyenne Tribal School	
		Lodge Grass H	S Lodge Grass MS	Wyola		
		St. Labre	St. Charles	Pretty Eagle	Other	
	3.	Number of years of experience as a licensed or state certified teacher: Your areas of teacher endorsement:				
Degre	es:		Major/Minor:	Institution:	Date Earned:	