

BECOMING AN EFFECTIVE DI TRAINER

APPLICATION

Please complete and return this form by May 31, 2024. Enrollment is limited. Applicants will be selected by the session leaders, and not all applicants may be accepted. Notification will be made by June 14, 2024.

Name

Mailing Address

City

State

Zip

Phone

Cell or Work Phone

Email

Position

Agency or School Affiliation

Please indicate the program, level, year trained (if applicable) and number of years you have taught *Reading Mastery Signature Edition (RMSE)*, *Reading Mastery Transformations (RMT)*, *Connecting Math Concepts: Comprehensive Edition (CMCCE)*, or *Corrective Reading Decoding and/or Comprehension* or any other DI programs. If you've taught two programs during one school year, please use .5 for each.

Program name and level	Year you were trained	Years taught
------------------------	-----------------------	--------------

- | | | |
|----|--|--|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. | | |

On a separate sheet of paper, please answer the following questions:

Why are you interested in this session?

How do you plan on using this training in your work situation?

Please fill out this application completely and send to:

Becoming an Effective DI Trainer
National Institute for Direct Instruction (NIFDI)
PO Box 11248 • Eugene, OR 97440
institutes@nifdi.org • Fax 541.236.9137