

**Dale Hickam Excellent Teaching Program
District Contacts Meeting**

RSVP Form

District Contact Information

Name: _____

School District: _____

Title: _____

Address: _____

City: _____ **Zip Code:** _____

Phone Number:(_____) _____

Fax Number:(_____) _____

Email Address: _____

- I will attend the meeting in Tallahassee on November 15th
- I will attend the meeting in Orlando on November 16th
- I will not attend either meeting

- I will stay overnight
- I will not stay overnight

List of staff members that will attend: (please print neatly)

Please email form to Amy Combs at Amy.Combs@fldoe.org or fax to 850-245-0435 by November 5, 2004.