



New England Troops to Teachers Employment Information



Serving Maine, New Hampshire, Vermont, Massachusetts, Connecticut and Rhode Island

Name: _____, _____, _____
(Please print) (Last) (First) (MI)

Last four of SSN: ____ ____ ____ ____

Troops to Teachers ID # (if known): _____

School District/State : _____

School House: _____

Subjects: _____

Grade(s): _____

Hire Date: _____

School Start Date: _____

High Need Criteria (if applicable)

Percentage of students eligible for Free/Reduced Lunch: _____

School Individuals with Disabilities Education Act (I.D.E.A.) percentage: _____

If you obtained the Free/Reduced Lunch and/or I.D.E.A. information from a State or School Official, what is their name, position title, phone number and/or email:

Thank you for your service!

Send this form to: **New England Troops to Teachers**
P.O. Box 44
Grafton, MA 01519

Email: nettt@maine.edu
FAX/Phone: (888) 463-6488

I hereby authorize the release of personal information to Troops to Teachers State Offices:

Signature: X _____ Date: _____