

Biographies of the Nation
Teaching American History Program
Participant Letter of Agreement

Congratulations! You have been selected to participate in the *Biographies of the Nation* Teaching American History Program. Please read the participant letter of agreement, initial and sign. Return this letter, along with the enclosed W-9 to the Project Manager **by October 8th** so that we may ensure you receive your colloquium honoraria before we adjourn from the MEA colloquium. **Send completed contracts and W-9's to:** Danice Roller Toyias, Project Manager, 25 Chestnut Grove Ave, Bozeman, MT 59718.

As a Biographies of the Nation participant, I will:

- Make every attempt to participate in all colloquia and institutes offered during the project year. This includes arranging for a substitute when I will be out of my classroom. I understand that TAH will reimburse my school district for my substitute costs (3 days during the winter colloquium) upon their invoicing MCHCE for my substitute.
- Make every attempt to participate in the six, ninety-minute, book study sessions during the project year.
- Continue participation during each project year, if I choose to do so, so long as I have participated in 75% or more of the professional development hours offered during the previous years' activities.
- Be paid for my participation and will provide project management with a W-9 during each year of the program, and I will notify project management immediately if there are changes to my address. I will be responsible for taxes owed, if any, on my honorarium.
- Receive \$310 for my full attendance at the fall two-day colloquium; \$490 for my full attendance at the winter three-day colloquium; \$670 for my full attendance at the summer 4-day institute; \$45 for fully attending each book study (there will be six, ninety-minute sessions); and \$825 for completing and providing project management with a digital copy of my Instructional Plan in accordance to the Instructional Plan Packet requirements. I can receive up to \$2,565 per year for my full participation in all project activities. For hours I am unable to attend, I understand that my honoraria will be pro-rated.
- Participate in Education Northwest (the external evaluator) evaluation activities, which include, but are not limited to: surveys, assessments, focus groups, and other feedback-related items.

Please initial the following:

_____ I understand that it is my responsibility to complete the necessary paperwork, course requirements, and pay the associated fees, with any graduate credit offerings I choose to take that are offered as part of this project.

_____ I understand that it is my responsibility to arrange and pay for my own travel for activities associated with this project, and that I will not be reimbursed for any travel expenses.

_____ I give permission to project staff to publish text, photos, video, and/or audio of my work and I on the MCHCE website. I understand that the dissemination of project activities is an objective of this project, and will provide Instructional Plans in digital format in order to meet Performance Measure 4.a., which is also an Invitational Priority of this grant.

Signed _____ Date _____

Print Name _____ District _____