

**2023-2024 Rural Network Superintendent/District Participation Form**

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| **District:** |  |
| **Mailing Address:** |  |
| **Superintendent’s Name:** |  |
| **Supt’s Phone:** |  | **Email:** |  |
| **Supt’s Admin Asst’s Name:** |  | **Phone:** |  |
| **Supt’s Admin Asst’s Email:** |  |

Our district will participate in **Welty’s Rural Network Executive Leadership Program** for the 2023-2024 school year.

**Fee to participate is a flat rate for $750 per district.**

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| **Member Name** | **Email Address** |
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Our district’s priority(ies) for 2023-2024 is (are):

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| Superintendent’s Signature |  | Date |

***Return to Mabel Franks. Scan and email to*** **mafranks@mail.fresnostate.edu** ***. Invoice will be sent upon receipt of completed form. Thank you! Looking forward to a great year.***