

**North Dakota Chapter of the
American Association of Teachers of German
Registration Form**

Date _____

Name _____

School _____

Street Address _____

City _____ State ____ Zip Code _____

Day Phone (____) _____

Evening Phone (____) _____

Email Address _____

Currently a member of AATG? Yes / No

Currently a member of FLAND? Yes / No

Currently a member of Central States? Yes / No

Currently a member of ACTFL? Yes / No

Do you teach via ITV or teleconferencing? Yes / No

Which grade levels do you teach? K-6 7-8 9-12 13-16
(Circle all that apply) Master's Programs Doctoral Programs

How many years have you been teaching German? _____

Where have you taught? _____

Please list your homepage here: _____

Please list your main areas of interest or concern: _____
