

IU1 Consortium Participation Form **2024-2025**

District Name: _____

Induction Coordinator

Name: _____

Address: _____

Phone Number: ☐ Work ☐ Cell

Email Address: _____

Induction Participants

We will contact you in September for a firm count.

Estimated number of first year teachers: _____

Estimated number of second year teachers: _____

Information and Registration

Register online in the [Frontline Education District Induction catalog](#) or by using the links on the District Induction Flyer.

Costs

- \$100 per district
- \$75 per participating teacher

Please complete and return to:

Sarah Collins
Intermediate Unit 1
One Intermediate Unit Drive
Coal Center, PA 15423
(sarah.collins@iu1.org)