



AMERICAN BALLET THEATRE

Project Plié

Teacher Nomination Form

ABT Certified Teacher's Name: _____

Email: _____

Phone: _____

Nominated Teacher's Name: _____

Current Teaching Position & Location: _____

Contact Info: _____

To complete the nomination process, please submit a cover letter outlining why you believe that this teacher should be chosen for the opportunity and how the ABT National Training Curriculum can assist their teaching in underrepresented communities. Please submit a resume on their behalf.

Send completed nominations via email, fax **OR** mail, postmarked no later than **December 31, 2019** to:

Molly Schnyder
Director of Training Programs
American Ballet Theatre
890 Broadway, 3rd floor
New York, NY 10003
mschnyder@abt.org
212.419.4396 – fax