

The superintendent's signature is required and must be submitted from the superintendent's email account. Completed copies of this form should be emailed to <u>assessment@la.gov</u>.

Please include "Contact Update" in the subject line. If you have any questions please contact <u>patricia.newman@la.gov</u>

| District/LEA Information | |
|--|--|
| District/LEA Code: | |
| District/LEA Name: | |
| Secure Shipping Address: | |
| (For Deliver) | y of Secure Materials) |
| Contact Information | |
| Name: | |
| Office Phone: | Mobile Phone: |
| | (optional) |
| Valid Email Address: | |
| As indicated in <u>Bulletin 118</u> ; §5319, pe accepted. | ersonal email addresses (Hotmail, Google, Yahoo, etc.) will not be |
| Current Position (select all that apply, |): |
| District Test Coordinator (DTC) | Backup DTC |
| Accountability Contact | Backup Accountability Contact |

District Test Coordinators are responsible for ensuring that state assessments are administered in accordance with <u>Bulletin 118</u> – *Statewide Assessment Standards and Practices.* The specific duties and responsibilities of the District Test Coordinator are addressed in <u>Bulletin 118</u>; §5501

District Accountability Contacts should have thorough knowledge of <u>Bulletin 111</u> – *The Louisiana School, District, and State Accountability System.*

Print Superintendent Name

Superintendent Signature

Date