



REAUTHORIZATION CONTACT FORM

Name of School: _____

The Charter Collaborative is requesting that the academy designate an individual and provide their contact information for the following topic areas:

Reauthorization Designee:

Serves as the point of contact between the academy and The Charter Collaborative for communication regarding the reauthorization process.

Name: _____

Phone: _____ Email: _____

Curriculum Designee:

Serves as the point of contact between the academy and The Charter Collaborative to verify the accuracy of the school's curriculum and provide changes, as necessary.

Name: _____

Phone: _____ Email: _____

Educational Program Designee:

Serves as the point of contact between the academy and The Charter Collaborative to verify the accuracy of the Educational Program currently contained in the charter contract and provide changes, as necessary.

Name: _____

Phone: _____ Email: _____

Physical Plant Description Designee:

Serves as the point of contact between the academy and The Charter Collaborative to verify the accuracy of the information contained in Schedule 8 of the charter contract and provide changes, as necessary.

Name: _____

Phone: _____ Email: _____

Position Description Designee:

Serves as the point of contact between the academy and The Charter Collaborative to verify the accuracy of the job descriptions currently on file and provide changes, as necessary.

Name: _____

Phone: _____ Email: _____