



INSTRUCTIONS: This form must be completed by **all** district technology coordinators each school year.

1. Download and save the form to your device.
2. Complete the form electronically and save.
3. Have the district administrator sign the form digitally.
4. Email signed form to DPI's Office of Educational Accountability at osamail@dpi.wi.gov

GENERAL INFORMATION			
CESA No.	District No.	District Name	
Name of District Technology Coordinator <i>First & Last</i>		Title	
Email	Phone <i>Area/No./Ext.</i>	Fax No. <i>Area/No.</i>	
SIGNATURE			
District Administrator's Name			
District Administrator's Signature		Date Signed <i>Mo./Day/Yr.</i>	
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