

## Representative Information List 2010-2011

School: \_\_\_\_\_

504 Team Chairperson: \_\_\_\_\_

Academic Coach: \_\_\_\_\_

Classified Communications Representative: \_\_\_\_\_

Edusoft Representative: \_\_\_\_\_

Energy Champion: \_\_\_\_\_

Graduation Coordinator (if applicable): \_\_\_\_\_

High School Advisory Representatives (1 per grade level-Name & E-mail):

9<sup>th</sup> Grade: \_\_\_\_\_

10<sup>th</sup> Grade: \_\_\_\_\_

11<sup>th</sup> Grade: \_\_\_\_\_

12<sup>th</sup> Grade: \_\_\_\_\_

In-service Representative: \_\_\_\_\_

Inventory Representative: \_\_\_\_\_

Kelly Services Substitute Contact: \_\_\_\_\_

KRONOS Manager: \_\_\_\_\_

Lead Mentor: \_\_\_\_\_

(Separate guidelines for submitting names of Primary/Secondary Mentors are included in the Principals' HR Guide.)

OJI Representatives (2): \_\_\_\_\_

PLAN Developer: \_\_\_\_\_

Parent Communications Representative: \_\_\_\_\_

Contact # and E-mail: \_\_\_\_\_

Partner in Education Representative: \_\_\_\_\_

**Preliminary Report Contact:** \_\_\_\_\_

**PowerTeacher Point of Contacts(2) :** \_\_\_\_\_ , \_\_\_\_\_

**\* Person(s) responsible for discipline data entry:** \_\_\_\_\_

**\* Person(s) responsible for attendance entry:** \_\_\_\_\_

**PTO/PTA President:** \_\_\_\_\_

**Address and Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Crisis Team / School Safety Committee Chairperson:** \_\_\_\_\_

**Team Members:**

Crisis Plan Information:                      \* School Emergency Management Team contact information- SAF-F019  
   \* School Demographics Information- SAF-F018  
   \* Agency Areas- SAF-F007  
   \* First Aid, CPR, and AED trained personnel- SAF-F011  
   \* School After Hours Contact information- SAF-F017

**Special Education Lead Teacher:** \_\_\_\_\_

**SRO (if applicable):** \_\_\_\_\_

**Contact # and E-mail:**

**Support Team Chairperson:** \_\_\_\_\_

**Teacher Communications Representative:** \_\_\_\_\_

**Testing Coordinator:** \_\_\_\_\_

**Textbook Coordinator:** \_\_\_\_\_

**\* Two Textbook Receivers in addition to the Textbook Coordinator:**

**Title IX Representative:** \_\_\_\_\_

**United Way Representative:** \_\_\_\_\_

**Submitted by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please notify Leigh Ann Parr via e-mail of any and all changes or updates that may occur during the calendar school year.