District/Agency Contact Information Update Form

It is the policy of the NYS Education Department (SED) to use e-mail for all bulk correspondence to school districts, including but not limited to policy notices, applications, funding opportunities and important deadlines. Therefore, it is imperative that we have correct contact information, including email addresses and that your district’s system allow delivery of email from SED. Please help us keep you up-to-date on the many changes happening in the various prekindergarten programs by completing this form. Completed forms may be emailed to oel@nysed.gov or faxed to 518-473-7737. Thank you.

Identify the program each contact is responsible for in the areas provided.

**Universal Pre-K** (UPK) or **Statewide Universal Full-Day Pre-K** (SUFDPK) [double click inside appropriate boxes to place a checkmark]

|  |  |
| --- | --- |
| **District Name:**  |  |
| **Physical Address:** |  |
| **City/Town:** |  |
| **Zip Code:** |  |

**SUPERINTENDENT/CHIEF EXECUTIVE OFFICER CONTACT INFORMATION:**

|  |  |
| --- | --- |
| **Prefix:** | [ ]  Ms. [ ]  Mr. [ ]  Dr. [ ]  Mrs. [ ]  Other \_\_\_\_\_\_\_\_ |
| **SUPT. Name:** |  |
| **Email Address:** |  |
| **Phone/Ext. #:** |  |
| **Fax #:** |  |
| **Mailing Address:** |  **or** [ ]  **Same as Physical** |
| **City/Town:** |  |
| **Zip Code:** |  |

**PROGRAM CONTACT INFORMATION:** [ ]  UPK [ ]  SUFDPK

|  |  |
| --- | --- |
| **Prefix:** | [ ]  Ms. [ ]  Mr. [ ]  Dr. [ ]  Mrs. [ ]  Other \_\_\_\_\_\_\_\_ |
| **Prog Contact Name:** |  |
| **Email Address:** |  |
| **Phone/Ext. #:** |  |
| **Fax #:** |  |
| **Bldg. & Address:** |  **or** [ ]  **Same as District** |
| **City/Town & Zip Code:** |  |

**PROGRAM CONTACT INFORMATION:** [ ]  UPK [ ]  SUFDPK

|  |  |
| --- | --- |
| **Prefix:** | [ ]  Ms. [ ]  Mr. [ ]  Dr. [ ]  Mrs. [ ]  Other \_\_\_\_\_\_\_\_ |
| **Prog Contact Name:** |  |
| **Email Address:** |  |
| **Phone/Ext. #:** |  |
| **Fax #:** |  |
| **Bldg. & Address:** |  **or** [ ]  **Same as District** |
| **City/Town & Zip Code:** |  |

**PROGRAM CONTACT INFORMATION:** [ ]  UPK [ ]  SUFDPK

|  |  |
| --- | --- |
| **Prefix:** | [ ]  Ms. [ ]  Mr. [ ]  Dr. [ ]  Mrs. [ ]  Other \_\_\_\_\_\_\_\_ |
| **Prog Contact Name:** |  |
| **Email Address:** |  |
| **Phone/Ext. #:** |  |
| **Fax #:** |  |
| **Bldg. & Address:** |  **or** [ ]  **Same as District** |
| **City/Town & Zip Code:** |  |

**PROGRAM CONTACT INFORMATION:** [ ]  UPK [ ]  SUFDPK

|  |  |
| --- | --- |
| **Prefix:** | [ ]  Ms. [ ]  Mr. [ ]  Dr. [ ]  Mrs. [ ]  Other \_\_\_\_\_\_\_\_ |
| **Prog Contact Name:** |  |
| **Email Address:** |  |
| **Phone/Ext. #:** |  |
| **Fax #:** |  |
| **Bldg. & Address:** |  **or** [ ]  **Same as District** |
| **City/Town & Zip Code:** |  |

**PROGRAM CONTACT INFORMATION:** [ ]  UPK [ ]  SUFDPK

|  |  |
| --- | --- |
| **Prefix:** | [ ]  Ms. [ ]  Mr. [ ]  Dr. [ ]  Mrs. [ ]  Other \_\_\_\_\_\_\_\_ |
| **Prog Contact Name:** |  |
| **Email Address:** |  |
| **Phone/Ext. #:** |  |
| **Fax #:** |  |
| **Bldg. & Address:** |  **or** [ ]  **Same as District** |
| **City/Town & Zip Code:** |  |