



Reauthorization Contact Form

Name of School: _____

The Center is requesting that the school designate an individual and provide their contact information for the following topic areas:

Reauthorization Designee

Serves as the point of contact between the school and the Center for communication regarding the reauthorization process.

Name: _____

Phone: _____

Email: _____

Curriculum Designee

Serves as the point of contact between the school and the Center 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 school and the Center 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 school and the Center to verify the accuracy of the information contained in Schedule 6 of the charter contract and provide changes, as necessary.

Name: _____

Phone: _____

Email: _____



THE GOVERNOR JOHN ENGLER

**CENTER FOR
CHARTER SCHOOLS**

CENTRAL MICHIGAN UNIVERSITY

Position Description Designee

Serves as the point of contact between the school and the Center to verify the accuracy of the position descriptions currently on file at the Center and provide changes, as necessary.

Name: _____

Phone: _____

Email: _____

Submission:

Please submit by the due date to the Center via Epicenter.

For more information, please contact:

Jennifer Cook, Contract Coordinator, at (989) 774-2100 or JCook@TheCenterForCharters.org