March 20, 2014

Dear Superintendents,

This form is to ensure that the information the Office of Language, Culture, and Equity maintains of the District Language Development contact remains up-to-date. **Please complete the form and return via email to Christine Deines at** **Deines\_C@cde.state.co.us****. If there are additional changes to information throughout the year, please remember to provide updates to the Office of Language, Culture and Equity.**

**FOR SECURITY REASONS PLEASE PROVIDE A DISTRICT APPROVED E-MAIL ADDRESS.**

|  |
| --- |
| **The CURRENT ELD contact information is:** |
| **Name: First and Last**       | **District Name:**      **District Code:**       |
| **Office Mailing Address:**       |
| **City:**       | **Zip:**       | **County:** |
| **Work Phone:**       | **Ext:**       | **Work Fax:** |
| **Email Address:** |
| **Mark X on one: Veteran ELD contact       or New ELD contact** |

**Superintendent Signature: \_ Date\_\_\_\_\_\_\_\_\_\_\_**