

CASE Change of School District Agreement

The following application is to be completed by the teacher and school administration when a CASE certified teacher has changed schools. CASE is committed to ensuring that teachers and students are supported in their efforts when adopting CASE curriculum resources. The following agreement ensures the communication of expectations required to make the CASE experience successful for all involved.

Administrative Responsibilities at local site

- Equipment and supplies for instruction related to CASE curriculum as recommended by CASE

Please complete all shaded sections before printing off the application. Once all shaded information is added, print off the application and obtain signatures. This application will serve as a contract between CASE and the teacher and their respective school administration.

Once information is typed into the shaded cells of this application, please print application and obtain signatures as requested. Return this form via US Mail to:

Miranda Chaplin, CASE Administrative Assistant
300 Garrigus Building
Lexington, KY 40546

Or return via email to: miranda.chaplin@case4learning.org

This form may also be attached to the online Change of School Form.

CASE Change of School District Agreement

Teacher Information					
First Name:				Last Name:	
Phone:		Email:			
CASE Certification(s):			AFNR	ASA	ASP
Name of School:					
Mailing Address:					
Mailing Address:					
City:		State:		Zip:	

By signing this application, I certify that I have attended the CASE Institute for the course(s) indicated above and will continue to provide instruction following the CASE model.

*Teacher Signature: _____ Date: _____

Administration Section

By signing this agreement, I agree to support the teacher and the implementation of CASE curriculum by providing the following requirements:

- Equipment and supplies for instruction related to CASE curriculum as recommended by CASE

I understand that students will not be CASE certified in the future if CASE program requirements are not provided for proper instruction. CASE certification will be critical for our students to receive articulation credit and participate in program of study examinations.

*Principal Signature: _____ Date: _____

First Name:				Last Name:	
Phone:		Email:			

*Superintendent Signature: _____ Date: _____

First Name:				Last Name:	
Phone:		Email:			