

**Louisiana School Turnaround Specialist Program
Cohort IV Nomination (Form 1)**

Directions: Please use this form to nominate a principal(s) from your district to be considered for the Louisiana Turnaround Specialist Program. A nominee should possess outstanding leadership abilities, and be a courageous and innovative leader, committed to overall school improvement and increased student achievement. Please duplicate this form if more than one principal is being nominated.

DISTRICT INFORMATION			
District Name			
Superintendent			
Address			
Phone	()	Fax	()
Email Address			
Total number of schools in district in Academic Assistance:			
Total number of schools in district in AUS1:		Total number of schools in district in AUS2:	
Total number of schools in district in AUS2 or above:			

TURNAROUND SPECIALIST NOMINEE INFORMATION			
Name			
School			
AUS Level of School:	Total years school in AUS including current year:		
Email Address			
Phone	()	Fax	()
Total number of years of administrative experience. ()	Total number of years of administrative experience at principal level only. ()	Total number of years serving as principal of nominated school: ()	Total number of years working at nominated school in any capacity: ()

HISTORY OF STUDENT ACHIEVEMENT AT TARGETED SCHOOL					
School Year	SPS	% Free/Reduced Lunch	Made AYP SPS Component Y/N	Made AYP Subgroup Component Y/N	Academic Assistance /SI Level
2009-10					
2008-09					
2007-08					
2006-07					
2005-06		<input type="text"/>	<input type="text"/>		<input type="text"/>

DISTRICT SUPERINTENDENT'S SIGNATURE

DATE