

**FLORIDA DEPARTMENT OF EDUCATION
Academic Achievement Through Language Acquisition
Office of The Chancellor, K-12 Public Schools**

**COMPREHENSIVE ENGLISH LANGUAGE LEARNING ASSESSMENT (CELLA)
PRIMARY DISTRICT CONTACT
REPORTING FORM**

Dear District Superintendents:

Please use this form to report the contact information for the staff person you have selected to be the primary contact person for the 2006 administration of CELLA.

District Name: _____ Date: _____

Name of Primary Contact: _____

Mailing Address: _____

Email Address: _____

Phone Number: _____ Fax Number: _____

Alternate Contact

Name of Alternate Contact: _____

Mailing Address: _____

Email Address: _____

Phone Number: _____ Fax Number: _____

PLEASE RETURN THIS FORM BY MARCH 31, 2006:

Via email to lisa.saavedra@fldoe.org

- OR -

By fax to Lisa C. Saavedra at 850-245-0846