Update to Adobe Reader 9 prior to starting form. Use your "Mouse" or "Tab" key to move through the fields, and the mouse to mark check boxes. After completing last field, save document to hard drive to make future updates or click print button.

ILLINOIS STATE BOARD OF EDUCATION
Educator and School Development Division
100 North First Street, E-310
Springfield, Illinois 62777-0001

REGIONAL SUPERINTENDENT'S SUMMARY REPORT ON RECOGNITION

INSTRUCTIONS:

1. List all school districts in your region, with district numbers arranged in numerical sequence.
2. Use “R” (Fully Recognized), “P” (Recognition Pending Further Review), “OP” (On Probation), “NR” (Nonrecognition) to indicate the recognition status recommended.
3. If one or more attendance centers in a district are recommended for less than Full Recognition, record the official name of each attendance center receiving less than Full Recognition in Column II and indicate the recognition status of each in Column III.

   Please include a written explanation of the specific compliance issues with details citing the reason(s) for the recommended recognition status. For example, if a school district is on “pending further review” status due to certification issues, please state the name of the individual, their respective teaching assignment, and why they do not meet the requirements. In addition, please include the written corresponding corrective action plan for each deficiency. Please feel free to use additional paper as needed.
4. Two copies of this report should be made and must have the signature of the Regional Superintendent. One copy should be retained in the regional office and the second copy should be sent to the Illinois State Board of Education at the above address no later than October 15, 2009.

Column I	Column II	Column III
DISTRICT NAME AND NUMBER	**ATTENDANCE CENTER**	**RECOGNITION STATUS 2009-2010**

Date _____ Region # _____ Submitted by _____

Column I	Column II	Column III
DISTRICT NAME AND NUMBER	ATTENDANCE CENTER	RECOGNITION STATUS 2009-2010

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