To request reprocessing of Fall Enrollment Count Data for your district, please complete the information below. This form must be faxed by the District to the Illinois State Board of Education via the following fax number: (217) 524-7784

Request for Fall Enrollment Count Reprocessing

Due to circumstances described below, we request that Fall Enrollment Count Data be reprocessed for our district. Reprocessing will remove all currently reported Fall Enrollment Count data for our district and will replace it with the data that currently resides in SIS. We certify that as of this date, all data in SIS for our district is correct and ready for reprocessing. We agree that we will not make changes in SIS data until we receive confirmation that this request has been completed as this may affect counts. We understand that if approved for reprocessing, it can only be reprocessed one time.

I have read and agree with the statement above and am providing the following information in request for the reprocessing of data for our district.

District Name _____
RCDT Code _____

Requestor's Name _____
Requestor's Position _____
Requestor's Phone Number_____
Requestor's email address_____

Brief description of problem which makes this request necessary:
_____
_____
_____
_____

Superintendent Signoff:

I certify that data for the district listed above is correct and ready to be reprocessed for Fall Enrollment Counts. Submission of this email to the Illinois State Board of Education signifies that data is ready to be reprocessed at this time and any further changes that may be made at the district level will not be included in Fall Enrollment Counts.

Superintendent's Print Name _____

Superintendent's Signature _____

Superintendent's Phone Number _____

Date Submitted _____

You will be notified upon completion of your request.