



Calendar Change Request Form

Important: All requests for calendar changes after September 1 should be recorded using this form.

Please take a moment to review these guidelines.

Instructions:

- Each request form submitted must include all revisions to be processed.
 - If any information is incomplete or in error the form will be returned.
 - Clearly state your request(s) in the text box.
- Use one (1) change form per each CTDS number and calendar track.
- Submit document by clicking on the "E-MAIL FORM" button at the bottom left corner.

Entity Name:

CTDS: **Fiscal Year:** **Track Number:**

- Activating A New Calendar/Track
- Changing An Existing Calendar/Track

Date(s) and Reason(s) for Change:
 **Please list the date and reason for each day affected by the change.
 For example: 5/25/17 – School Not in Session**

Authorizing Person: **Date:**

Job Title: **Phone:**

By checking this box, we verify that this calendar meets the minimum instructional time requirements as defined in A.R.S. 15-901.

*You may use Outlook or web based email. Otherwise, you will need to print, scan and save as an attachment to email to SFAnalystTeam@azed.gov