Northern Ohio Educational Computer Association
DATA RELEASE PERMISSION FORM

This document may be submitted, for the testing periods, by all school districts requesting NOECA to send Proficiency Vendor Data to _____. The file will be used for the School District attending the training.

School/District Name: _____

May this letter serve as authorization for NOECA to release the vendor proficiency data to a third party vendor for the SCHOOL YEAR _____.

Please check the proficiency test grade levels needed:

4th Grade Prof _____ ___March

6th Grade Prof _____ ___March

9th Grade Prof _____ ___Oct ___Mar ___May ___July

12th Grade Prof _____ ___Feb

_____
Superintendent Signature Date

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Please fax back to NOECA 419-627-5608