

DASL District Survey

DASL District Survey

The following information must be documented before the DASL Implementation process can begin.

School District Name	
Approx. Number of Students K-12	
Please list the names of all of your buildings for the 06-07 school year and what grade levels each building will contain.	
Contact Info (Name, Email, Phone) Please list one main contact for each building and a phone and fax number.	
Preferred Conversion Date: Choices are: August 2006 Nov 2006 February 2007 April 2007 May 2007 August 2007 * These dates are approximate timelines	
DASL Point of Contact name/email/phone Only 1 person per district	
What software packages do you use that interface with the POISE software? (ie.. cafeteria, bus routing software, gradebook packages, safari, library etc.)	
Other District Notes * Anything else unique to your district that we would need to know prior to conversion	

Return survey by February 28, 2006 Fax number: (419) 627-5608