### 

**Principal Change Verification**

[District]

[School Name]

*Due no later than 10 days prior to proposed principal hire date*

**Purpose**

**The change of a turnaround principal constitutes a material change to the district’s approved turnaround plan. As a result, the district must receive written approval from the Department prior to changing a turnaround principal.** The purpose of this document is for a district to request a principal change for a turnaround school. This ensures that the principal has a successful record in leading a turnaround school and the qualifications to support the student population being served.

**Directions**

Districts shall complete this form when there is a proposed principal change at a turnaround school. This completed form must be signed by the superintendent or authorized representative and emailed to [BSI@fldoe.org](mailto:BSI@fldoe.org), no later than 10 days prior to the proposed principal hire date. The department will respond within 5 business days of receipt of a completed form. The subject line of the email must include district name, school name and Principal Change Verification.

**School**

In the box below, identify the name and MSID number of the school that will be supported through the turnaround plan.

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| **School Name/ MSID Number** |
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**Principal Assurance**

The district agreed in their state board approved turnaround plan to the following assurance:

**Assurance 2: School Capacity-Leaders and Educators**

The district shall ensure the principal has a successful record in leading a turnaround school and the qualifications to support the student population being served.

In the box below, the district must provide information about its systems to ensure the school has an effective administrator capable of leading the turnaround efforts, including desired experience and competencies, recruitment and retention incentives and operational flexibility. At a minimum, reply to the following:

1. Explain the rationale for replacing the principal.
2. Provide the principal’s name and proposed start date, selection process and leadership experience.
3. Provide evidence that indicates the principal has a proven record of success in turnaround schools and the qualifications to support the community served.
4. What operational flexibility will be afforded to the principal, such as the degree of input in selecting their school leadership team and instructional staff?
5. What actions will the district take regarding the school leadership team if the school’s grade does not improve?

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**Acknowledgement**

The district verifies the information in this form and confirms that they have collaborated with the school and the Regional Executive Director.

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| **Name and title of person responsible for completion and submission of Principal Change Verification** |
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| **Contact information: email, phone number** |
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| **Date submitted to the Bureau of School Improvement (due 10 days prior to proposed hire date)** |
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| **Superintendent signature (or authorized representative)** |
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