



MULTI SCHOOL DATA FORM

Date: _____

Name: _____ Position: _____

District/Organization: _____

Phone: _____ Email: _____

Address: _____ City, State: _____ Zip Code: _____

School	DI Subject: Read (R) Lang (L) Math (M)	Kindergarten Full Day (Y/N)	% Free and Reduced Lunch	% Special Ed	% ELL	Number of Students (including Sped Ed, ELL, etc.)												# of Teachers *	# of Assistants *	Total # of Students	
						Grade K	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	Grade 6	Grade 7	Grade 8	Grade 9	Grade 10	Grade 11				Grade 12
1																					
2																					
3																					
4																					
5																					
6																					
7																					
8																					
9																					
10																					
11																					
12																					
TOTAL																					

* Include all teachers, specialists, and other instructional staff available to teach a group.

Please return completed form to info@nifdi.org or fax to 541.236.9137.



MULTI SCHOOL DATA FORM

School 1: _____

Address: _____ **City, State:** _____ **Phone:** _____

Principal: _____ **Email:** _____

Asst. Principal: _____ **Building Coord./Reading Coach:** _____

Additional staff available to instruct groups (Title I staff, paraprofessionals, librarians, secretaries, etc.):

Comments/Additional Information:

School 2: _____

Address: _____ **City, State:** _____ **Phone:** _____

Principal: _____ **Email:** _____

Asst. Principal: _____ **Building Coord./Reading Coach:** _____

Additional staff available to instruct groups (Title I staff, paraprofessionals, librarians, secretaries, etc.):

Comments/Additional Information:

Please return completed form to info@nifdi.org or fax to 541.236.9137.



MULTI SCHOOL DATA FORM

School 3: _____

Address: _____ **City, State:** _____ **Phone:** _____

Principal: _____ **Email:** _____

Asst. Principal: _____ **Building Coord./Reading Coach:** _____

Additional staff available to instruct groups (Title I staff, paraprofessionals, librarians, secretaries, etc.):

Comments/Additional Information:

School 4: _____

Address: _____ **City, State:** _____ **Phone:** _____

Principal: _____ **Email:** _____

Asst. Principal: _____ **Building Coord./Reading Coach:** _____

Additional staff available to instruct groups (Title I staff, paraprofessionals, librarians, secretaries, etc.):

Comments/Additional Information:

Please return completed form to info@nifdi.org or fax to 541.236.9137.



MULTI SCHOOL DATA FORM

School 5: _____

Address: _____ **City, State:** _____ **Phone:** _____

Principal: _____ **Email:** _____

Asst. Principal: _____ **Building Coord./Reading Coach:** _____

Additional staff available to instruct groups (Title I staff, paraprofessionals, librarians, secretaries, etc.):

Comments/Additional Information:

School 6: _____

Address: _____ **City, State:** _____ **Phone:** _____

Principal: _____ **Email:** _____

Asst. Principal: _____ **Building Coord./Reading Coach:** _____

Additional staff available to instruct groups (Title I staff, paraprofessionals, librarians, secretaries, etc.):

Comments/Additional Information:



MULTI SCHOOL DATA FORM

School 7: _____

Address: _____ **City, State:** _____ **Phone:** _____

Principal: _____ **Email:** _____

Asst. Principal: _____ **Building Coord./Reading Coach:** _____

Asst. Principal: _____ **Building Coord./Reading Coach:** _____

Additional staff available to instruct groups (Title I staff, paraprofessionals, librarians, secretaries, etc.):

Comments/Additional Information:

School 8: _____

Address: _____ **City, State:** _____ **Phone:** _____

Principal: _____ **Email:** _____

Asst. Principal: _____ **Building Coord./Reading Coach:** _____

Additional staff available to instruct groups (Title I staff, paraprofessionals, librarians, secretaries, etc.):

Comments/Additional Information:

Please return completed form to info@nifdi.org or fax to 541.236.9137.



MULTI SCHOOL DATA FORM

School 9: _____

Address: _____ **City, State:** _____ **Phone:** _____

Principal: _____ **Email:** _____

Asst. Principal: _____ **Building Coord./Reading Coach:** _____

Additional staff available to instruct groups (Title I staff, paraprofessionals, librarians, secretaries, etc.):

Comments/Additional Information:

School 10: _____

Address: _____ **City, State:** _____ **Phone:** _____

Principal: _____ **Email:** _____

Asst. Principal: _____ **Building Coord./Reading Coach:** _____

Additional staff available to instruct groups (Title I staff, paraprofessionals, librarians, secretaries, etc.):

Comments/Additional Information:

Please return completed form to info@nifdi.org or fax to 541.236.9137.



MULTI SCHOOL DATA FORM

School 11: _____

Address: _____ **City, State:** _____ **Phone:** _____

Principal: _____ **Email:** _____

Asst. Principal: _____ **Building Coord./Reading Coach:** _____

Additional staff available to instruct groups (Title I staff, paraprofessionals, librarians, secretaries, etc.):

Comments/Additional Information:

School 12: _____

Address: _____ **City, State:** _____ **Phone:** _____

Principal: _____ **Email:** _____

Asst. Principal: _____ **Building Coord./Reading Coach:** _____

Additional staff available to instruct groups (Title I staff, paraprofessionals, librarians, secretaries, etc.):

Comments/Additional Information:

Please return completed form to info@nifdi.org or fax to 541.236.9137.