**Technology Director Change Form**

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| **District Name:** |  |
|  |  |
| **District Number:** |  |
|  |  |
| ***Outgoing***  **Technology Director**  Name: |  |
| *Departing* Effective Date: |  |
|  |  |
|  |  |
| ***Incoming***  **Technology Director**  Name: |  |
| Effective Date: |  |
| Email: |  |
| Phone Number: |  |
|  |  |
|  |  |
| ***Secondary***  **Technology Contact**  Name: |  |
| Email: |  |
| Phone Number: |  |
|  |  |
|  |  |

**The below authorizes TDOE to change the Technology Director on record:**

*Please note, TDOE only requires one signature. It can be the outgoing Technology Director or an “Authorizing” signature.*

*By entering my name below, I attest to the accuracy of information provided on this form. In addition, I understand that by virtue of employment with the TDOE, I may have access to confidential student and teacher data, including personally identifiable information (PII). I understand that the unauthorized disclosure of PII is prohibited by federal and state law, including the Federal Educational Rights and Privacy Act of 1974 (“FERPA”), the Tennessee Data Accessibility, Transparency and Accountability Act (“DATAA”), Individuals with Disabilities Education Act (“IDEA”), and the National School Lunch Act.*

*I acknowledge that I fully understand that improper disclosure of PII to any unauthorized person could subject me to criminal and civil penalties imposed by law. I further acknowledge that improper disclosure of PII violates TDOE policy and could constitute just cause for disciplinary action, including termination of my employment, regardless of whether criminal or civil penalties are imposed.*

**Typing your name below serves as your signature:**

|  |  |
| --- | --- |
| **Authorizing Signature** | **Date** |

***Please submit this form via email to DT.Support@tn.gov.***