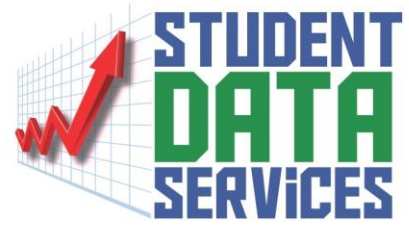




## Student Data Services

750 Waverly Avenue  
Holtsville, NY 11742  
631-218-4195



### NYSITELL ASAP Account Request for NYSITELL Reports

Please submit contact information for 1-2 staff members who will be provided access to the web-based ASAP NYSITELL Reporting Application.

**The ASAP application does not have building level access accounts, therefore the staff members assigned these accounts must have permission to view records for all district students.**

These staff members will be expected to disseminate ALL NYSITELL SCORE REPORTS to appropriate building personnel in a timely manner.

	1 <sup>st</sup> Account Designee	2 <sup>nd</sup> Account Designee
Name		
Title		
Email		
Phone		

I request ASAP accounts for the above personnel. I understand these accounts provide access to NYSITELL outcomes for all students in my district, and acknowledge that the account designees are aware of, and will adhere to, all FERPA regulations regarding access to student information.

**These accounts cannot be restricted to a specific school or department!**

District Level Administrator or District Data Coordinator:

Signature: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

District: \_\_\_\_\_ Date: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_

**Please FAX completed form to: (631) 240-8967 Attn: Barbara Ball  
or email [bball@esboces.org](mailto:bball@esboces.org)**