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**Texas FITNESSGRAM® 10 Order Request Worksheet**

Thank you for deciding to register your district/LEA to receive access to the FITNESSGRAM 10 State Hosted software. This worksheet will help you gather the information you need to complete your registration online at www.fitnessgram.net/texas. Please note that *completing this worksheet does not qualify as an application* and will not be accepted--it is simply provided as a planning tool to help you. Some important points to remember:

* You can only register online via the above link. No phone, email, or mail registrations will be accepted.
* Only an authorized individual within your district should complete the online form (i.e., district physical education coordinator, district administrator, or IT supervisor).
* The district registers as one entity for all schools within the district.
* **All information on the worksheet is required**, including checkboxes.
* Upon clicking the Submit button, you will be allowed to review your responses before officially submitting your information.
* Please review the FAQ (located at www.fitnessgram.net/texas) if you would like more information about FITNESSGRAM 10 State Hosted software for Texas schools. If you have further questions, please contact [k12sales@hkusa.com](mailto:k12sales@hkusa.com).

**Person Completing the Online Registration Web Form**

|  |  |
| --- | --- |
| First and last name |  |
| Title |  |
| Email address |  |
| Phone number |  |

**Letter of Agreement (LOA)**

For Web Hosting by The Cooper Institute (sample LOA available on the registration form).

|  |  |
| --- | --- |
| Check box to agree to all terms of the LOA |  |
| Check box indicating authorized individual has agreed to the terms of the LOA |  |
| Name of authorized individual |  |
| Title of authorized individual |  |
| Email address and phone number of authorized individual |  |

**Your District/LEA Information**

|  |  |
| --- | --- |
| Select your Educational Service Center (ESC) |  |
| Select your district |  |

**Student Information System Vendor**

In an effort to ensure quality data in the Texas FITNESSGRAM 10 software database, HK will need to approve the templates for all import files from the LEAs. The following questions regarding your current FITNESSGRAM import files used in your district will assist HK in providing you access to the FITNESSGRAM 10 software once it is available. Please confer with your IT staff regarding these questions to ensure correct responses.

|  |  |
| --- | --- |
| 1. Does your district currently get its FITNESSGRAM extract file from a Student Information System vendor? | Yes or No? [answer required] |
| 1. If the response to #1 is yes, please write in the name of that vendor: | [list vendor name] |
| 1. If the response to #1 is no, please provide the contact information for the individual responsible in your district for the current FG import file preparation. | Name:  Phone:  Email address: |

**Contact Information**

For individuals to receive a high level of access to the FITNESSGRAM 10 state software for your district/LEA.

|  |  |
| --- | --- |
| For a **district/LEA Instructional Technology director or staff person**, please provide name, email address, title, and phone number…. | Note: This person will be given a high permission level for your district’s access to the FITNESSGRAM 10 state software. This person will be set-up as a district administrator security level in the software. This person will receive an email from The Cooper Institute once the LEA account has been set up. |
| Name/Email address/IT title/ Phone number: |  |
| For a **PE district coordinator/Department head/Curriculum Director**, please provide name, email address, title, and phone number…. | Note: This person will be given a high permission level for your district’s access to the FITNESSGRAM10 state software. This person will be set-up as a district administrator security level in the software. This person will receive an email from The Cooper Institute once the LEA account has been set up. |
| Name/Email address/PE title/Phone number: |  |
| Checkbox | Indicates the person completing the registration form online has informed these two individuals that they will receive the emails from Cooper Institute for the FITNESSGRAM software. |

**Central Office Shipping Information**

Each school in the district receives a FITNESSGRAM manual with eight keycode letters (to be used by the PE teachers) for the FITNESSGRAM online course. These materials will be shipped to a central location with the district being responsible for distributing to the schools.

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| --- | --- |
| Contact name to receive |  |
| Contact phone number |  |
| District name |  |
| Building name (optional, if appropriate) |  |
| Street address (No P.O. Box numbers permitted) |  |
| City/State/Zip |  |