



# SAT Coordinator Change Form

Please complete this form to let us know that the test coordinator at your test center has changed. In addition to completing this form, the new test coordinator must review the [Key Information for Test Coordinators](#). Return the completed document to [satweekend@collegeboard.org](mailto:satweekend@collegeboard.org). Change requests must be received by College Board at least 7 business days prior to testing.

**All fields are mandatory.**

Test Center Number (5 digits) \_\_\_\_\_ Test Center Name \_\_\_\_\_

Name of Outgoing/Former Test Coordinator \_\_\_\_\_

**Name of Incoming/New Test Coordinator** \_\_\_\_\_

Work Phone Number \_\_\_\_\_ Ext. \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Email Address (school email preferred) \_\_\_\_\_

**Name of Alternate/Backup Coordinator** \_\_\_\_\_

Work Phone Number \_\_\_\_\_ Ext. \_\_\_\_\_

Cell Phone Number \_\_\_\_\_

Email Address (school email preferred) \_\_\_\_\_

**Name of Principal/Head of Institution** \_\_\_\_\_

Work Phone Number \_\_\_\_\_ Ext. \_\_\_\_\_

Email Address \_\_\_\_\_

Principal/Head of Institution Signature \_\_\_\_\_

Change is effective for:

☐ All current admins   ☐ Aug   ☐ Oct   ☐ Nov   ☐ Dec   ☐ Mar   ☐ May   ☐ Jun

☐ I acknowledge that I have been informed of all agreed upon test dates and capacity at my center for the remainder of this testing year.

☐ I understand that I and other testing staff will be asked to agree to and follow rules relating to their role as testing staff. These will include terms set forth in a testing staff agreement and in Test Day Toolkit, the College Board web-based application for administering tests.

☐ I give consent for College Board to share my personally identifiable information with third parties providing services to College Board as necessary for their performance of those services including, but not limited to, those related to honoraria (payments) made to me as Testing Staff.

New Test Coordinator Signature \_\_\_\_\_

Effective Date \_\_\_\_\_