



**NEW YORK STATE TEACHERS' RETIREMENT SYSTEM**  
 10 Corporate Woods Drive, Albany, NY 12211-2395  
 Fax: (518) 431-8798

## DISTRICT CONTACT CHANGE (CSA)

**This form is used to notify NYSTRS of a change in the Chief School Administrator only. For any other changes use form QTR-81.** The CSA must sign the bottom of this form to authorize use of the information provided. In order for NYSTRS to send forms and supplies by UPS, please provide a street address.

**PLEASE NOTE: Once the change of Chief School Administrator is made at NYSTRS, the CSA will receive an email from our Webmaster regarding access to the Employer Secure Area (ESA).**

DISTRICT NAME	DISTRICT CODE
DISTRICT STREET ADDRESS	DISTRICT P.O. BOX
CITY/VILLAGE	ZIP CODE

**Chief School Administrator** (examples - Superintendent, Acting or Interim Superintendent, President, Acting or Interim President). This individual is responsible for the district/college.

NAME	TITLE	
NYSTRS EMPLID	EMAIL ADDRESS	
PHONE NUMBER	EXTENSION	FAX NUMBER

In addition, please submit copies of all signed employment and salary agreements, including amendments and salary notices for the new Chief School Administrator.

You may fax the completed form and requested documents to NYSTRS at (518) 431-8798 or by mail to the address at the top of the form.

CHIEF SCHOOL ADMINISTRATOR'S SIGNATURE	DATE
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