

(Insert School Letterhead/Mascot Image Here)

Parents Right -To -Know

August 2020

Dear Parent:

We are pleased to notify you that in accordance with the *Every Student Succeeds Act of 2015*, you have the right to request information regarding the professional qualifications of your child's teacher. Specifically, you may request the following:

- Whether the teacher has met State qualification and licensing criteria for the grade levels and subject areas in which the teacher provides instruction.
- Whether the teacher is teaching under emergency or other provisional status through which State qualification or licensing criteria has been waived.
- The baccalaureate degree major of the teacher and any other graduate certification or degree held by the teacher, and the field of discipline of the certification or degree.
- Whether the child is provided services by paraprofessionals and, if so, their qualifications.

If you would like to receive this information, please go to the school's website and print a Teacher Qualification Form or request a form from the main office. Complete the top of the form and return it to your child's school.

You can also find your child's teacher's credentials by checking the Alabama State Dept of Education's website by following these steps:

1) Go to www.alsde.edu 2) Click on **Department Offices** 3) Scroll down to far right column and go to **Office of Teaching and Learning** section and click on *Educator Certification* 4) Click on *Certificate Search* and enter the teacher's *Last Name* and *First Name* and click [Search](#). Should you have any questions, feel free to contact the school and someone will assist you.

Sincerely,

Principal

Parents Right-To-Know • Request Teacher Qualifications

Title I, Part A, Section 1112(c)(6), *Every Student Succeeds Act*, Public Law 114-95

I am requesting the professional qualifications of _____

who teaches my child, _____ at _____
Child's Name (Please Print) School (Please Print)

My name is _____ My phone number is _____
Name (Please Print)

My mailing address is _____
Street (Please Print) City Zip

Signature Date

This Section to be Completed by the School

Date Form Received: _____ Received by: _____

Teacher's Name: _____ Subject: _____

Has the teacher met state qualifications and licensing criteria for the grade levels and subject areas in which he/she teaches? Yes No

Is the teacher teaching under emergency or other provisional status? Yes No

Undergraduate Degree _____ (University/College)
Major Discipline _____

Graduate Degree _____ (University/College)
Major Discipline _____

Does a paraprofessional provide instructional services to the student? Yes No

If yes, what are the qualifications of the paraprofessional?

High School Graduate [REDACTED] (Year)

Undergraduate Degree _____ (University/College)
Major/Discipline _____

College/University Credit _____ (Hours)
Major/Discipline _____

Signature of Person Completing Form Date Returned to Parent