

Lauderdale County School System
Parents Right-To-Know Request Teacher Qualifications
ESSA, Sec. 1112(c)(6) and Sec. 1112(e)(1)(A)

I am requesting the professional qualifications of _____,
who teaches my child, _____, at _____.
My Child's Name (Please Print) School (Please Print)

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

My telephone number is _____.

My name is _____.
Name (Please Print)

Signature Date

This Section to be Completed by School/Central Office

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 _____ (Year)

Undergraduate Degree _____ (University/College)

Major/Discipline _____

College/University Credit _____ (Hours)

Major/Discipline _____

Workkeys Assessment _____ Yes _____ No

Signature of Person Completing Form

Date Returned to Parent