



September 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](http://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,

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Principal



MONTGOMERY  
PUBLIC SCHOOLS

## 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 \_\_\_\_\_ (Year)

Undergraduate Degree \_\_\_\_\_ (University/College)  
Major/Discipline \_\_\_\_\_

College/University Credit \_\_\_\_\_ (Hours)  
Major/Discipline \_\_\_\_\_

\_\_\_\_\_  
Signature of Person Completing Form Date Returned to Parent