Notice of Right to Know Teacher Qualifications

Date: August 2014

Re: No Child Left Behind (NCLB) Act, Section 1111 (h)(6)(A)

Dear Parent/Guardian:

As a parent/guardian, you have the right to know about the teaching qualifications of your child’s classroom teacher in a school receiving Title I funds. The federal No Child Left Behind (NCLB) Act requires that any local school district receiving Title I funds must notify parents that they may ask about the professional qualifications of their child’s classroom teacher.

These qualifications include:

1. Whether the teacher has met the Ohio teacher licensing criteria for the grade level and subject areas in which the teacher provides your child instruction.
2. Whether the teacher is teaching under emergency or temporary status that waives state licensing requirements.
3. The undergraduate degree major of the teacher and any other graduate degree or certification (such as National Board Certification) held by the teacher and the field of discipline of certification or degree.
4. Whether your child is provided services by instructional paraprofessionals and, if so, their qualifications.

You may access this information via the Ohio Department of Education website (http://www.education.ohio.gov) by:

- Selecting “teachers” on the red toolbar
- Under "resources", select “educator profile”
- Type in the teacher’s first and last name, then click “search”
- Click on the “red arrow” to select the desired teacher and use the list on the left side of the page to obtain information regarding the teacher's credentials

If you cannot locate the qualifications above on the ODE website, you may ask for the information to be provided to you by returning this letter to the address listed above or you may fax or e-mail your request to the listed fax number or e-mail address below. Be sure to give the following information with your request:

Child’s Name: ________________________________________________________________

Parent/Guardian Name: ______________________________________________________

Address: ___________________________________________________________________

City, State, Zip Code: _______________________________________________________

Teacher’s Name: ____________________________________________________________

Sincerely,

Cameron M. Ryba
Assistant Superintendent

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