

To: All Parents in Title I Schools  
From: *Charlotte-Mecklenburg Schools*  
Date: September 5, 2012  
Subject: "Right to Know" Notification to Parents of Teacher and Teacher Assistant Qualifications

The federal No Child Left Behind law requires school districts to notify parents of children attending a Title I school of their **right to know** the professional qualifications of the classroom teachers who instruct their child.

As a recipient of these funds, *CMS* will provide you with this information in a timely manner if you request it. Specifically, you have the right to request the following information about each of your child's classroom teachers:

- Whether the teacher meets the state qualifications and licensing criteria for the grades and core academic subjects he or she teaches.
- Whether the teacher is teaching under emergency status because of special circumstances.
- The teacher's college major, whether the teacher has any advanced degrees, and the field of discipline of the certification or degree.
- Whether teacher assistants provide services to your child and, if so, their qualifications.

In addition, the law requires that all schools that receive Title I funds must provide notification to every parent in the school whose child is being taught for four or more weeks by a teacher who is not Highly Qualified.

*CMS* is committed to providing quality instruction for all students and does so by employing the most qualified individuals to teach and support each student in the classroom. If you would like to receive any of the information listed above for your child's teacher, please complete the enclosed form and send in as directed.

Encl.: Teacher/Teacher Assistant Information Request Form

Para: Todos los Padres de las Escuelas de Título I

De: A. Johnson

Asunto: Notificación para los Padres del "**Derecho a Saber**" de las Cualificaciones de Maestro y Asistente de Maestro

La ley federal Que Ningún Niño se Quede Atrás requiere que los distritos escolares notifiquen a los padres de los niños que asisten a una escuela del Título I de su **derecho a saber** acerca de las cualificaciones profesionales de los maestros que enseñan a sus hijos.

Como esta escuela recibe estos fondos, A. Johnson le proporcionará a usted esta información en el tiempo oportuno si usted lo solicita. Específicamente, usted tiene el derecho de solicitar la siguiente información acerca de cada uno de los maestros de su hijo:

- Si el maestro cumple con los requisitos estatales y los criterios de licencia de enseñanza para los grados y las materias académicas básicas que él o ella enseña.
- Si el maestro está enseñando en un caso de emergencia por circunstancias especiales.
- el grado universitario del maestro; ya sea que el maestro tenga título de posgrado y el área de estudio en las certificaciones o títulos.
- Si los asistentes de maestros proveen servicios a su hijo y, de ser así, sus cualificaciones.

Igualmente, la ley requiere que todas las escuelas que reciben fondos de Título I notifiquen a cada uno de los padres cuando su hijo está siendo enseñado por cuatro semanas o más por un maestro de la escuela que no está Altamente Cualificado.

[Principal] se compromete a proporcionar una enseñanza de calidad para todos los estudiantes, empleando a las personas más calificadas para enseñar y apoyando a cada estudiante en el salón de clase. Si desea recibir la información mencionada anteriormente acerca del maestro de su hijo, por favor complete el formulario adjunto y envíelo como se le indica.

Adjunto: Formulario de Solicitud de Información de Maestro/Asistente de Maestro



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Harding University High School

2001 Alleghany Street  
Charlotte, North Carolina 28208

## TEACHER/TEACHER ASSISTANT INFORMATION REQUEST FORM

[DISTRICT]

### Request for Information About Teacher/Teacher Assistant Qualifications

Instructions to Parents: Please complete this form. Use a separate form for each teacher or teacher assistant. Return the completed form to your school's office or mail to: *[DISTRICTS WILL NEED TO DETERMINE EXACTLY WHERE FORMS SHOULD BE SENT AND HOW THEY WILL BE RETURNED TO PARENTS.]* Information will be sent to you within 30 days.

School Name: \_\_\_\_\_

Name of Teacher: Mr.    Mrs.    Ms. \_\_\_\_\_

or

Name of Teacher Assistant: Mr.    Mrs.    Ms. \_\_\_\_\_

Grade Level: \_\_\_\_\_ Subject (if applicable):

\_\_\_\_\_

Name of Parent(s) Requesting Information:

\_\_\_\_\_

Name of Student:

\_\_\_\_\_

Mailing Address (where information is to be sent or faxed):

\_\_\_\_\_

City

State

Zip code

Fax number: \_\_\_\_\_

Daytime telephone number in case of questions: \_\_\_\_\_

Phone: 980-343-6007 ■ Fax: 980-343-6015 ■ [www.cms.k12.nc.us](http://www.cms.k12.nc.us)

In compliance with federal law, Charlotte-Mecklenburg Schools administers all education programs, employment activities and admissions without discrimination against any person on the basis of gender, race, color, religion, national origin, age or disability. Americans with Disabilities Act (ADA) Accessibility: If auxiliary aids for communication are necessary for participation in a CMS program or service, participants are encouraged to notify the ADA coordinator at least one week prior to program commencement at 980-343-6661 (voice) or [accessibility@cms.k12.nc.us](mailto:accessibility@cms.k12.nc.us).



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## FORMULARIO DE SOLICITUD DE INFORMACIÓN DE MAESTRO/ASISTENTE DE MAESTRO

[PRINCIPAL]

Solicitud de información acerca de las Cualificaciones de Maestro/ Asistente de Maestro

Instrucciones para los padres: Por favor, complete este formulario. Utilice un formulario individual para cada maestro o asistente de maestro. Envíe el formulario completo a la oficina de su escuela o por correo a: [PRINCIPAL WILL NEED TO DETERMINE EXACTLY WHERE FORMS SHOULD BE SENT AND HOW THEY WILL BE RETURNED TO PARENTS. La información será enviada a usted dentro de 30 días.

Nombre de la Escuela: \_\_\_\_\_

Nombre del Maestro: Sr. Sra. Srta. \_\_\_\_\_o

Nombre de la Asistente del Maestro: Sr. Sra. Srta. \_\_\_\_\_

Nivel de Grado: \_\_\_\_\_ Materia de Enseñanza (si es aplicable):  
\_\_\_\_\_

Nombre del Padre(s) solicitando esta información:  
\_\_\_\_\_

Nombre del Estudiante:  
\_\_\_\_\_

Dirección de Domicilio (a donde la información será enviada por correo o fax):  
\_\_\_\_\_

Domicilio

Ciudad

Estado

Código Postal

Número de fax: \_\_\_\_\_

Número de teléfono en caso de preguntas: \_\_\_\_\_

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**TEACHER/TEACHER ASSISTANT INFORMATION RESPONSE FORM**

NAME OF TEACHER: \_\_\_\_\_

This teacher has a (bachelor's, master's) degree in \_\_\_\_\_ (subject).

This teacher (does, does not) meet the state qualifications and licensing criteria for the grades and subjects he or she teaches. \_\_\_\_\_ (List grades/subjects.)

This teacher (is, is not) licensed in the State of North Carolina.

(If applicable) This teacher is licensed in another state: \_\_\_\_\_

This teacher (is, is not) teaching under emergency status because of special circumstances.

NAME OF TEACHER  
ASSISTANT: \_\_\_\_\_

This teacher assistant works under the direct supervision of a Highly Qualified teacher, has a high school diploma or its equivalent, and has obtained/completed or is in the process of obtaining/completing: (check one and circle appropriately)

\_\_\_ obtained / is obtaining required coursework at an institution of higher education; **or**

\_\_\_ obtained / is obtaining an associate's degree from an accredited community college, technical school or other institution of higher education; **or**

\_\_\_ completed / is completing the North Carolina Department of Labor Teacher Assistant Apprenticeship Program; **or**

\_\_\_ completed / is completing Level I competencies of the North Carolina Association of Teacher Assistants Professional Development Program; **or**

\_\_\_ completed / is completing the community college placement tests in reading, mathematics and writing, and 96 hours of staff development in reading, writing, mathematics, working with special populations of students, technology, or classroom management; **or**

\_\_\_ completed / is completing the WorkKeys Occupational Profile for Teacher Assistants in the areas of reading, writing and mathematics, and completed 96 hours of staff development in reading, writing mathematics, working with special populations of students, technology or classroom management.

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## FORMULARIO DE SOLICITUD DE INFORMACIÓN DE MAESTRO/ASISTENTE DE MAESTRO

NOMBRE DEL MAESTRO: \_\_\_\_\_

Este maestro tiene un grado de (licenciatura, maestría) en la siguiente materia: \_\_\_\_\_.

Este maestro (sí, no) reúne las cualificaciones del estado y criterio de licenciatura para los grados y materias que él o ella enseñan. \_\_\_\_\_ (Lista de grados/materias)

Este maestro (está, no está) certificado por el Estado de Carolina del Norte.

Este maestro tiene su licenciatura en otro estado (Si es aplicable): \_\_\_\_\_

Este maestro (está, no está) enseñando en un caso de emergencia debido a circunstancias especiales.

NOMBRE DEL ASISTENTE DE MAESTRO:

\_\_\_\_\_

Este asistente de maestro trabaja bajo la supervisión directa de un maestro Altamente Cualificado, tiene un diploma de la escuela superior o su equivalente y ha recibido/completado o está en el proceso de recibir/completar:  
(check one and circle appropriately)

\_\_\_ recibió/está recibiendo los cursos requeridos en una institución de educación superior; **o**

\_\_\_ recibió /está por recibir su grado de asociado de un colegio comunitario acreditado, escuela técnica u otra institución de educación superior; **o**

\_\_\_ completó/está completando el Programa de Aprendizaje de Asistente de Maestro del Departamento Laboral de Carolina del Norte; **o**

\_\_\_ completó/ está completando los estudios del Nivel I del Programa de Capacitación Profesional de Asistente de Maestro de la Asociación de Carolina del Norte; **o**

\_\_\_ completó/está completando los exámenes de ubicación en lectura, matemática y escritura en un colegio comunitario y 96 horas de capacitación personal en lectura, escritura y matemática; trabajó/está trabajando con estudiantes de un grupo especial, manejo de salón de clase **o** tecnología; **o**

\_\_\_ completó/está completando el Perfil Ocupacional de "WorkKeys" para Asistentes de Maestros en lectura, escritura y matemática y 96 horas de capacitación personal en lectura, escritura y matemática; trabajó/está trabajando con estudiantes de un grupo especial, manejo de salón de clase **o** tecnología.

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