

## Request for Teacher/Paraprofessional Qualifications

As a parent or guardian of a student in the Adrian Public Schools, you have the right to know the professional qualifications of the teachers who work with your child. If you would like to request this information, please complete the top part of this request and bring or mail it to the Adrian Public Schools Human Resources Office, 785 Riverside Avenue, Suite 1, Adrian, MI, 49221.

Student's Name:		Grade		
School Student is Attending:				
I would like information on the p	rofessional qual	lifications of my st	udent's:	
Teacher:				
	Teacher's	Name – One Request I	Per Form	
Paraprofessional:				
	_	sional's Name – One I	_	
Parent or Guardian Name(Printed	l):			
	Home Address/	City/State/Zip		
Parent or Guardian Signature:			Date:	
To be completed by the Human	Resources Off	fice:		
The teacher is certified in	the State of Mi	chigan for the grad	e or subjects they tea	ach.
The teacher is under an E	mergency perm	it or other provision	nal status.	
The teacher has the following qua	alifications:	Tenured	Probationary	Year
Bachelor's Degree	e in			
Bachelor's Degree	e + 18 semester	hours in		
Master's Degree in	n			
Master's Degree +	- 15 semester ho	ours in		
Master's Degree +	- 30 semester ho	ours in		
Specialist certifica	ation or Ph.D in			
The paraprofessional has the follo	owing qualificat	tions:		
Associates Degree	e or 2 years equi	valent		
Years of experience	ce working with	school-aged child	ren	
Other:				