**Board of Education**
1824 Harris Road
Sheffield, OH 44054
*PH: 440-949-4204*

**Brookside High School**
1662 Harris Road
Sheffield, OH 44054
*PH: 440-949-4220*

**Brookside Middle School**
1662 Harris Road
Sheffield, OH 44054
*PH: 440-949-4228*

**Brookside Intermediate School**
1812 Harris Road
Sheffield, OH 44054
*PH: 440-949-4237*

**Forestlawn Early Learning Center**
3975 Forestlawn Avenue
Sheffield Lake, OH 44054
*PH: 440-949-4238*

**Knollwood Elementary**
4975 Oster Road
Sheffield, OH 44054
*PH: 440-949-4234*

www.sheffieldschools.org

## Notice of Parents Right-to-Know

RE:  Every Student Succeeds Act (Public Law 114-95), Section 1112(e)(1)(A)

Dear 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 Every Student Succeeds Act (ESSA) requires that any school district receiving Title I funds must notify parents of each student attending any school receiving Title I funds that they may request, and the district will provide the parents on request (and in a timely manner), information regarding the professional qualifications of the student's classroom teachers, including at a minimum, the following:

I. Whether the teacher has met State qualification and licensing criteria for the grade levels and subject areas in which the teacher provides instruction;
II. Whether the teacher is teaching under emergency or other provisional status through which State qualification or licensing criteria have been waived; and
III. Whether the teacher is teaching in the field of discipline of the certification of the teacher;
IV. Whether your child is provided services by paraprofessionals and, if so, their qualifications.

You may ask for the information by returning this letter to the address listed above.  Or you may fax or e-mail your request to the above listed fax number or e-mail address.  Be sure to give the following information with your request:

Child's Full Name_____

Parent/Guardian Full Name_____

Address_____

City, State, ZIP_____

Teacher's Name_____

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