



# BURLINGTON SCHOOL DISTRICT

Building a Learning Community

## Title 1 Teacher Qualification Inquiry

TO BE COMPLETED BY PARENT OR GUARDIAN:

PLEASE PRINT

Request Date: \_\_\_\_\_

Name of Requesting Parent/Guardian: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

School: \_\_\_\_\_ Teacher: \_\_\_\_\_

Subject: \_\_\_\_\_

TO BE COMPLETED BY BURLINGTON SCHOOL DISTRICT:

\* The teacher has met state licensure requirements for the grade level(s) and subject area(s) they are teaching: Yes \_\_\_\_\_ No \_\_\_\_\_

\* The teacher is teaching under an emergency license: Yes \_\_\_\_\_ No \_\_\_\_\_

\* The college major and/or graduate certification or degree(s) held by this teacher: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* Is the student provided services by paraprofessionals: Yes \_\_\_\_\_ No \_\_\_\_\_  
(If yes, please see the attached Paraeducator Qualification Inquiry form.)

Prepared by: \_\_\_\_\_

Date Completed: \_\_\_\_\_

cc: School Principal: \_\_\_\_\_

If you have questions, please contact Sara Jane Mahan, Director of Human Resources, 864-2150 or email, [smahan@bsdvt.org](mailto:smahan@bsdvt.org).

Form Number: NCLB#1 082305

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