

Sealey Elementary Math and Science Magnet School

Principal: Demetria Clemons

Assistant Principal: Leslie Moore



2815 Allen Road
Tallahassee, Florida 32312

Phone: 850-488-5640

Fax: 850-488-1239

Website: <https://www.leonschools.net/sealey>

PARENT RIGHT TO KNOW NOTICE LEON COUNTY SCHOOLS

Date: August 19, 2025

Dear Parent(s)/Guardian(s):

We are pleased to notify you that, in accordance with the *Every Student Succeeds Act (ESSA)*, you have the right to request information regarding the professional qualifications of your child's teacher. Specifically, you may request the following:

- Information about whether the teacher has met state qualification and licensing criteria for the grade levels and subject areas in which the teacher provides instruction.
- Information about whether the teacher is teaching under emergency or other provisional status through which state qualification or licensing criteria has been waived.
- Information about the baccalaureate degree major of the teacher and any other graduate certification or degree held by the teacher as well as the field of discipline for the certification or degree.
- Information about whether the child is provided services by paraprofessionals and, if so, their qualifications.

If you would like to receive the information above, please complete the top portion of the enclosed form and return it to your child's school.

In addition, you may request the following information about state assessments from your child's school:

- Information about the level of achievement and academic growth of your child, if applicable and available, on each of the state academic assessments required under ESSA

Please contact the school at Mrs. Leslie Moore to request assessment information. If you have any questions, feel free to call Mrs. Moore at (850) 524-1980 and she will be happy to assist you.

Sincerely,

A handwritten signature in black ink that reads "Demetria Clemons".

Principal

"No person shall on the basis of sex, marital status, sexual orientation, race, religion, ethnicity, national origin, age, color, pregnancy, disability, military status or genetic information be denied employment, receipt of services, access to or participation in school activities or programs if qualified to receive such services, or otherwise be discriminated against or placed in a hostile environment in any educational program or activity including those receiving federal financial assistance, except as provided by law." No person shall deny equal access or a fair opportunity to meet to, or discriminate against, any group officially affiliated with the Boy Scouts of America, or any other youth group listed in Title 36 of the United States Code as a patriotic society."

Wallace Knight
Equity and Title IX Compliance Officer
Leon County Schools
2757 West Pensacola Street
Tallahassee, Florida 32304
(850) 487-7210
Knighthwa@leonschools.net

Parents Right-To-Know Request for Teacher Qualifications/Assessment Information

Title I, Part A, Section 1112(c) (6), *Every Student Succeeds Act*, Public Law 114-95

I am requesting the professional qualifications of _____

Name of My Child's Teacher (Please Print)

Child's Name (Please Print)

School (Please Print)

Mailing Address _____

Street (Please Print)

City

Zip

My name is _____

Name (Please Print)

Telephone number _____

Email _____

Signature

Date

OFFICE USE ONLY: THIS SECTION WILL BE COMPLETED BY THE SCHOOL.

Date Form Received: _____

Received by: _____

Teacher's Name: _____

Subject: _____

Has the teacher met state qualifications and licensing criteria for the grade levels and subject areas in which he/she teaches?

Yes _____

No _____

Is the teacher teaching under emergency or other provisional status? _____

Yes _____

No _____

Undergraduate Degree _____

(University/College)

Major Discipline _____

Graduate Degree _____

(University/College)

Major Discipline _____

Does a paraprofessional provide instructional services to the student? _____

Yes _____

No _____

If yes, what are the qualifications of the paraprofessional?

High School Graduate _____

(Year) _____

Undergraduate Degree _____

(University/College)

Major/Discipline _____

College/University Credit _____

(Hours) Major/Discipline _____

Signature of Person Completing Form

(Print Title)

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