



# Richmond Heights Local Schools

447 Richmond Road, Richmond Heights, OH 44143 • Phone: 216-692-0086 • Fax: 216-692-2820

“It’s a New Day for the Richmond Heights Way”

## BOARD OF EDUCATION

### President

Nneka Slade Jackson

### Vice-President

Bobby Jordan

### Members

Frank Barber

Linda Pliodzinskas

Dr. Hugh A. Turner

## ADMINISTRATION

### Superintendent

Renee T. Willis, Ph.D.

### Treasurer

Cooper Martin

### Secondary Principal

Marnisha Brown

### Elementary Principal

Elizabeth Taylor

### Director of Educational Services

Kelly Askew

### Director of Operations

Timothy King

### Director of Special Education

Lakisha Davies

### Dean of Students, S.S.

Shaun Lodge

### Dean of School Culture, E.S.

Lloyd Garrett

### Technology Integration Coach

TBA

September 30, 2021

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;
- III. Whether the teacher is teaching in the field of discipline of the certification of the teacher; and
- 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 provided 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 \_\_\_\_\_

Sincerely,

*Renee T. Willis*

Renee T. Willis, PhD  
Superintendent