



LEVITTOWN PUBLIC SCHOOLS

Levittown Memorial Education Center
Abbey Lane

Levittown, New York 11756

Success for Every Student



Jaclyn Guidice
Assistant Superintendent for Human Resources
(516) 434-7030
Fax (516) 520-8332

Date:

Student's Name _____

School _____ Grade _____

Dear Parent or Guardian:

This letter is in response to your request for information regarding the qualifications of your Child's classroom teacher(s) or paraprofessional staff:

(Teacher's Name)

_____ has met state qualifications and licensing criteria for the grade levels and subject areas in which the teacher provides instruction:

School Psychologist

_____ is teaching under emergency or temporary status through which state qualification or licensing criteria has been waived.

(Paraprofessional's Name)

_____ Teaching Assistant

or

_____ has completed at least two years of study at an institution of higher learning

or

_____ has passed a rigorous formal State or local academic assessment designed to demonstrate knowledge of and the ability to assist in instruction in reading, writing and math or reading readiness, writing readiness and math readiness

Sincerely,

Jaclyn Guidice