

DRAFT/Sample – Not Highly Qualified

*(District Name)*  
*(Street Address)*  
*(City/Town/Village, NY, Zip)*

Dear Parent or Guardian:

This letter is to inform you that your child has been assigned, or has been taught for four or more consecutive weeks by, a teacher who is not highly qualified.

The circumstances of the situation are as follows:

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We hope that this will only be necessary on a temporary basis. We anticipate and appreciate your cooperation in this matter.

Sincerely,

Superintendent of Schools

DRAFT/Sample Not Highly Qualified Teacher - Notification
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\_\_\_\_\_

Date

Dear Parents,

I am writing in compliance with the No Child Left Behind Act of 2001 and to make you aware that your child's classroom teacher is not highly qualified to provide instruction for your child per New York State requirements. The following information is furnished to you regarding this notification.

- Name of teacher \_\_\_\_\_
- Subjects taught \_\_\_\_\_
- Required license, qualifications, or certification for this duty  
\_\_\_\_\_
- Current discrepancy between required qualifications and qualifications of your child's teacher  
\_\_\_\_\_  
\_\_\_\_\_

Please know that your district continues to make every effort to employ highly qualified staff to instruct your child. Should you have questions or concerns about the above please do not hesitate to contact me.

Sincerely,

Principal