

Altmar-Parish-Williamstown Central School District

Parent or Legal Guardian Request for Annual Professional Performance Review (APPR) Overall Composite Score and Effectiveness Rating for Teacher or Principal

New York State law allows parents and legal guardians of a student to request the effectiveness scores and final ratings of teachers and principals to which the student is assigned for the current school year.

To request this information about your child's current teacher/principal please complete this request form and mail it to:

R. Darby
Assistant Superintendent for Curriculum & Instruction
Altmar-Parish-Williamstown Central School District
639 County Route 22, Parish, New York 13131

Please mail your request; faxed or emailed requests will not be accepted. It is the obligation of the school district to verify all information provided in this request.

Parent Statement of Understanding:

As the parent or legal guardian of a child in the APW Central School District, I understand that I have the right to obtain information related to the Annual Professional Performance Review for a legitimate purpose. I understand this report contains personally identifiable information. I will respect the privacy of district employees and not share this information with others, including other parents and / or guardians. If asked, I will encourage others to utilize the established process for accessing APPR ratings and, as a matter of courtesy I will refrain from sharing this information via any types of social media.

Student Name:	
School / Grade Presently attending:	
Name of Parent / Guardian making request:	
Address:	
Phone Number:	
Email Address:	

Name of Teacher / Principal for whom final quality rating and composite effectiveness is requested.

I hereby attest that I am the parent or legal guardian of the above-named student and that I understand the information is intended for my own use.

Signature of Parent or Legal Guardian _____ Date

For School District Use Only	
Received (date) _____	by (staff name) _____
Request Verified (date) _____	by (staff name) _____
Response mailed (date) _____	by (staff name) _____