

Rush-Henrietta Central School District •

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Teacher/Principal Composite Effectiveness Score Request

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

Parents and legal guardians of a student may request the Composite Effectiveness Score and Final Quality Rating for teachers and principals to which the student is assigned for the current school year. To do so, complete this form and send it to:

Ms. Dina Wilson, Assistant Superintendent Office of Curriculum and Instruction Rush-Henrietta Central School District 2034 Lehigh Station Road Henrietta, NY 14467

Please mail your request or	drop it off at the locatio	n designated above. Fax or e-mail submission	s will not be accepted.
Student name:			
Student date of birth:	_/		
School and grade where stu	ident currently attends:		
Name of parent or legal gu	ardian making request:		
Address:			
Phone number:		E-mail address:	
Teacher/Principal name(s)	for whom final quality ra	ating and composite effectiveness is requested	l:
for my use only and will no	t be shared with others in so information will be pro	e above-mentioned student. I understand the in any way, including social media. I also undersided in written format. It is the obligation of	erstand that information will
	S	Signature of Parent or Legal Guardian	Date
	FOR	DISTRICT USE ONLY	
Date Received:	by	Appeal Pending: Y/N	1
Date Request Verifi	ed: by	Date Parent/Guardian In	formed:
Data Response Mail	led: by		