TEACHER/TEACHER ASSISTANT INFORMATION REQUEST FORM

Brunswick County Schools

Request for Information About Teacher/Teacher Assistant Qualifications

Instruction to Parents: Please complete this form. Use a separate form for each teacher or teacher assistant. Return the completed form to your school's office or mail to: Brunswick County Human Resources Department, 35 Referendum Drive, Bolivia, NC 28422. Information will be sent to you within 30 days.

School Name: _____

Name of Teacher: Mr. Mrs. Ms. _____

Grade Level: _____ Subject (if applicable): _____

Name of Parent(s) Requesting Information: _____

Mailing Address (where information is to be sent or faxed):

_____

Street Address City State Zip Code

Fax number: _____

Daytime telephone number if you have questions: _____

For District Use Only:

Received by school/date/initials _____

Received by HR date/initials _____

Completed by initials/mail/fax/date _____

Copy to: _____

Notes: