



**Parents/Guardian Rights in Education**

1-401

*Instructor Background and Experience*

Name of Instructor:

Certificated to teach in current assignment     yes    no

Emergency or provisional status                       yes    no

Name of Undergraduate Educational Preparation Institution(s) and Degrees:

Name of Post-Graduate Institution(s), Degrees and/or Additional Training:

*Professional Experience*

Grade level or Academic Content Subject Area\* Years Taught: