

**VERIFICATION OF A HIGHLY QUALIFIED
SUBJECT AREA CONTENT TEST**

Fill in the information above the broken line. Please print or type.

Last name	First name	Middle name	Maiden name
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Street address	City	State	Zip code
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Social security number	Date of birth (month, day, year)
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To the state education agency or school district NCLB officer:

Please complete the information below that applies to the above-named Florida teacher and return the form to the Florida School District Certification Office as indicated below.

The applicant is highly qualified in _____
[subject area(s) & level(s)]

_____ based on having passed a
subject area content test appropriate for each subject area indicated.

Verifying Office & Title (please print)

Signature and date

Verifying agency

State

PLEASE RETURN FORM TO:

**Lois Schuck, Sr. Coordinator of Teacher Certification
School Board of Polk County
P O Box 391
Bartow, FL 33831**

The School Board of Polk County, Florida prohibits any and all forms of discrimination and harassment based on race, color, sex, religion, national origin, marital status, age, homelessness, or disability or other basis prohibited by law in any of its programs, activities, or employment. If you require any type of accommodation to complete the employment process due to a disability, please call the Human Resource Services Division at (863)-534-0781. If you are deaf or hard of hearing, please contact the Polk County School District by calling Florida Relay Service at 1-800-955-8771.

