


Report Status: Submitted		<b>FORMULA</b>		Report ID: 0006080644670001		
		Organization: Iraan-Sheffield ISD		County District: 186903004		
		Campus/Site: PYOTE HS		ESC Region: 18		
		SAS#: NCLBAA09		Vendor ID: 1746001443		School Year: 2008-2009
<b>2008-2009 Annual Survey of Highly Qualified (HQ) Teachers</b>						
Printable Version						Save
Exit		PR1100 - Highly Qualified (HQ) Survey		Instructions		
				Amendment #	Version #	
				00	01	
<input type="checkbox"/> District Not Required to Report This Campus (if selected, go to Part 10 to submit report)						
<b>Part 1: LEA Information</b>						
Campus Name		PYOTE HS				
Campus Number		186903004				
<b>Part 2: Number of Teachers</b>					Help	
				Regular	Special Ed.	
Total number of Teachers in Core Academic Subject areas				4	0	
<b>Part 3: Core Academic Subject Classes</b>					Help	
Subject		Regular		Special Education		
		A	B	C	D	
		# of Classes	# of Classes Taught by HQ Teachers	# of Classes	# of Classes Taught by HQ Teachers	
<b>Elementary (Grades PK-6): 1 Teacher = 1 Class</b>						
1.	All Subjects	0	0	0	0	
<b>Secondary (Grades 7-12): Each Section Taught Counts as 1 Class</b>						
2.	English	4	4	0	0	
3.	Reading/Language Arts	0	0	0	0	
4.	Mathematics	4	4	0	0	
5.	Science	4	4	0	0	
6.	Foreign Languages	0	0	0	0	
7.	Civics and Government	1	1	0	0	
8.	Economics	1	1	0	0	
9.	Arts	0	0	0	0	
10.	History	1	1	0	0	
11.	Geography	1	1	0	0	
<b>Total Secondary</b>		16	16	0	0	
<b>Grand Total</b>		16	16	0	0	
<b>Total % Highly Qualified</b>				100.00		
<b>Part 4: Number of Core Academic Teachers Who Are Teaching on the Following Permits</b>					Help	
Permit		# of Teachers				
		Elem. (PK-6)		Secondary (7-12)		
1.	Emergency (for certified personnel)	0		0		
2.	Emergency (for uncertified personnel)	0		0		
3.	Nonrenewable	0		0		
4.	Temporary Classroom Assignment	0		0		
5.	District Teaching	0		0		
6.	Temporary Exemption	0		0		
<b>Part 5: Reasons for Not Being Classified as Highly Qualified in All Assignments</b>						
Elementary School Classes					Number	

1.	Elementary School Classes Taught by Certified General Education Teachers Who Did Not Pass a Subject-Knowledge Test or (if eligible) Have Not Demonstrated Subject-Matter Competency through HOUSE	0
2.	Elementary School Classes Taught by Certified Special Education Teachers Who Did Not Pass a Subject-Knowledge Test or (if eligible) Have Not Demonstrated Subject-Matter Competency through HOUSE	0
3.	Elementary School Classes Taught by Teachers Who Are Not Fully Certified (and Are Not in an Approved Alternative Route Program)	0
4.	Other (please explain)	0

Secondary School Classes		Number
5.	Secondary School Classes Taught by Certified General Education Teachers Who Have Not Demonstrated Subject-Matter Competency in Those Subjects (e.g., Out-of-Field Teachers).	0
6.	Secondary School Classes Taught by Certified Special Education Teachers Who Have Not Demonstrated Subject-Matter Competency in Those Subjects.	0
7.	Secondary School Classes Taught by Teachers Who Are Not Fully Certified (and Are Not in an Approved Alternative Route Program).	0
8.	Other (please explain)	0

**Part 6: FTEs of Special Education Teachers for Students by Age**

		Students 3-5	Students 6-21
1	Special Education FTEs That Are Highly Qualified	0.00	0.00
2	Special Education FTEs That Are Not Highly Qualified	0.00	0.00
3	Special Education FTEs That Are Not Required to Be Highly Qualified	0.00	1.00

**Part 7 is hidden because you haven't selected either 'TA' or 'SW' on SC5000 schedule in the NCLB grant application.**

**Part 8 is hidden because you haven't selected either 'TA' or 'SW' on SC5000 schedule in the NCLB grant application.**

**Part 9: Additional LEA Data (optional)** 500 of 500

**Part 10: Certification and Incorporation**

**Primary Contact**

<b>First Name</b> 25 of 30	<b>Initial</b>	<b>Last Name</b> 25 of 30	<b>Title</b> 26 of 40
Kevin		Allen	Superintendent
<b>Telephone</b>	<b>Ext.</b>	<b>Fax</b>	<b>E-Mail</b> 39 of 60
432-639-2512	223	432-639-2501	kevin.allen@isisd.net
			<b>Confirm E-Mail</b> 39 of 60
			kevin.allen@isisd.net

**Certification and Incorporation Statement**

I hereby certify that the information contained in this report is, to the best of my knowledge, correct and that the local education agency named above has authorized me as its representative to submit this data. I further certify that reported program activities were conducted in accordance with all applicable State laws and regulations, and instructions, the Provisions and Assurances, Debarment and Suspension, Lobbying Requirements, Special Provisions and Assurances, and the schedules of the approved application for funding.

**Authorized Official**

Click this button if the Authorized Official's contact information is the same as the Primary Contact information.

<b>First Name</b> 25 of 30	<b>Initial</b>	<b>Last Name</b> 25 of 30	<b>Title</b> 26 of 40
Kevin		Allen	Superintendent
<b>Telephone</b>	<b>Ext.</b>	<b>Fax</b>	<b>E-Mail</b> 39 of 60
432-639-2512	223	432-639-2501	kevin.allen@isisd.net
			<b>Confirm E-Mail</b> 39 of 60
			kevin.allen@isisd.net

**Submitter Information**

<b>First Name</b>	<b>Last Name</b>	<b>Approval ID</b>	<b>Submit Date and Time</b>
Kevin	Allen	e186903kall	11/1/2008 8:44:28 PM

Only the legally responsible party may submit this report.