

PRINCIPAL SCORE REQUEST FORM

I, _____, certify that I am the parent or legal guardian of
_____, a student at the Brentwood Union Free School District's
(student's name)
_____ School.
(building)

I am hereby requesting the final quality rating and composite effectiveness score for my child's
Principal

I acknowledge that I am receiving this requested information as the parent or legal guardian of
_____, and that the requested information is not subject to public disclosure
(student's name)
under the New York State Freedom of Information Law (FOIL). I further understand that the District's Annual
Professional Performance Review (APPR) Plan is available on the District's website:

["Annual Professional Performance Review \(APPR\)" at www.brentwood.k12.ny.us.](http://www.brentwood.k12.ny.us)

Date

Signature

For Building Use Only:

Information provided on (date): _____

Type of Identification: _____

Identification verified by: _____

80-20-172289