January 29, 2019

MEMORANDUM

TO: City and County Superintendents of Education

FROM: Eric G. Mackey
      State Superintendent of Education

RE: Recommendations for Membership on the 2019-2020 Alabama State Textbook Committee for Mathematics, Health, and Physical Education

The State Textbook Law (Code of Alabama, 1975, §16-36-60) provides that the Alabama State Textbook Committee be composed of four elementary teachers and four high school teachers to be appointed one from each of the seven congressional districts and one to be appointed statewide; four teachers, principals, supervisors, or superintendents to be appointed from the state-at-large; two college employees, one of whom shall be knowledgeable in the field of elementary education and one knowledgeable in the field of secondary education; and nine lay persons to be appointed by the Governor of Alabama.

Please recommend three persons who are knowledgeable in the mathematics, health, and physical education subject area from your school system to be considered for membership on the 2019-2020 Alabama State Textbook Committee for Mathematics, Health, and Physical Education, Grades K-12. Please use the attached form to recommend one elementary teacher, one high school teacher, and one member-at-large who may be a teacher, principal, or supervisor. It would be very helpful if the persons recommended are contacted to verify that they are able to serve before the names are submitted.

Your completed form should be returned by February 22, 2019, to the Alabama State Textbook Program, Instructional Services Section, Alabama State Department of Education, Post Office Box 302101, Montgomery, Alabama 36130-2101. You may also send the form via email to srodatz@alsde.edu or by fax to (334) 694-4970.

If you have any questions, please contact Mr. Martin Dukes, Administrator, Alabama State Textbook Program, at telephone number (334) 694-4768 or by email at mdukes@alsde.edu. Thank you for your cooperation in this matter.

EGM:MMD:SMR
Attachment
FY19-2048
RECOMMENDATIONS
2019-2020 ALABAMA STATE TEXTBOOK COMMITTEE
MATHEMATICS, HEALTH, AND PHYSICAL EDUCATION, GRADES K-12

ELEMENTARY TEACHER:
Name: ____________________________ Type Certificate: _______ Endorsements: _______
State Congressional District: ______ State School Board District: ______ Name of School: ______________________
Home Address: __________________________ Street Address: __________________________
________________________ Street Address
City ____________ Zip
School Address: __________________________ Street Address: __________________________
________________________ Street Address
City ____________ Zip
Home Telephone Number: ______________________ School Telephone Number: ______________________
Grade Level(s) and/or Subject(s) Taught: ________________________________________________

SECONDARY TEACHER:
Name: ____________________________ Type Certificate: _______ Endorsements: _______
State Congressional District: ______ State School Board District: ______ Name of School: ______________________
Home Address: __________________________ Street Address: __________________________
________________________ Street Address
City ____________ Zip
School Address: __________________________ Street Address: __________________________
________________________ Street Address
City ____________ Zip
Home Telephone Number: ______________________ School Telephone Number: ______________________
Grade Level(s) and/or Subject(s) Taught: ________________________________________________

MEMBER-AT-LARGE: Check One: ☐ Teacher ☐ Principal ☐ Supervisor/Administrator
Name: ____________________________ Type Certificate: _______ Endorsements: _______
State Congressional District: ______ State School Board District: ______ Name of School: ______________________
Home Address: __________________________ Street Address: __________________________
________________________ Street Address
City ____________ Zip
School Address: __________________________ Street Address: __________________________
________________________ Street Address
City ____________ Zip
Home Telephone Number: ______________________ School Telephone Number: ______________________
Special Subject Area(s): ___________________________________________________________

SIGNED: ____________________________ DATE: ____________________________
Local Superintendent