



# Board of Education petition

**Requesting the Attorney General to file charges seeking discipline of a holder of a certificate of license to teach** (§168.071.2, RSMo Cum. Supp. 2005)

**Return to:**  
Missouri Attorney General's Office  
Attn: Teacher Certification Discipline  
PO Box 899  
Jefferson City, MO 65102

**MISSOURI ATTORNEY GENERAL  
CHRIS KOSTER**

**573-751-1143  
ago.mo.gov**

## PETITIONER'S INFORMATION

_____	_____
PETITIONER'S NAME	POSITION
_____	_____
SCHOOL DISTRICT	DISTRICT LOCATION

## TEACHER'S INFORMATION

_____	( )	_____
TEACHER'S NAME		CURRENT HOME PHONE
_____	_____	_____
CURRENT ADDRESS	CITY	STATE ZIP
SCHOOL WHERE TEACHER WAS/IS WORKING _____		
_____	_____	_____
SCHOOL'S ADDRESS	CITY	STATE ZIP

## FACTS

**Specific subsection of §168.071.1, RSMo Cum. Supp. 2005, under which petitioner believes teacher should be disciplined** \_\_\_\_\_

**Complete statement of facts giving rise to this petition (attach additional pages as needed):**

Provide **copies** of any documents, including correspondence, notes and minutes of meetings, in your possession that petitioner believes provide information relevant to the allegations.

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**FACTS**

List every person having first-hand knowledge of facts giving rise to this petition (attach additional pages as needed):

NAME \_\_\_\_\_ POSITION \_\_\_\_\_ ( )  
HOME PHONE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

NAME \_\_\_\_\_ POSITION \_\_\_\_\_ ( )  
HOME PHONE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

NAME \_\_\_\_\_ POSITION \_\_\_\_\_ ( )  
HOME PHONE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Has law enforcement been involved in this matter? If so, please list each agency involved.

\_\_\_\_\_  
\_\_\_\_\_

Is there any other civil or criminal litigation involving any aspect of the facts raised by this petition? If so, to the best of your knowledge, please list the names of all cases and courts in which such litigation is pending.

CASE NAME \_\_\_\_\_ COURT \_\_\_\_\_

CASE NAME \_\_\_\_\_ COURT \_\_\_\_\_

CASE NAME \_\_\_\_\_ COURT \_\_\_\_\_

Submitted by \_\_\_\_\_ ( )  
NAME PHONE

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**VERIFICATION STATEMENT**

I attest that I am authorized to petition the Attorney General of Missouri by a majority of the Board of Education of \_\_\_\_\_.

\_\_\_\_\_  
PETITIONER'S SIGNATURE

**NOTARY SIGNATURE**

Subscribed and sworn before me, this \_\_\_\_\_ day of \_\_\_\_\_, 2\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC'S SIGNATURE

**Please return the completed petition and all required documentation to:** Missouri Attorney General's Office  
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