State of Rhode Island and Providence Plantations
A. Ralph Mollis
Secretary of State

Rules and Regulations Filing Form

1. Agency Name and Address
Education, Board of Regents for Elementary and Secondary

255 Westminster Street

2. Title of Rule
Board of Regents Regulation - Teacher Competency in English

3. Statutory Source of Authority
R.I.G.L. 16-60-1 ; R.I.G.L. 16-60-4

4. Concise Explanatory Statement - §42-35-2.3
State of RI and Providence Plantations Board of Regents for Elementary and Secondary Education Concise Summary of Proposed Non-technical Amendments to Board of Regents Regulation - Teacher Competency in English In accordance with the Administrative Procedures Act, Section 42-35-3(a)(1) of the General Laws of Rhode Island, following is a concise summary of proposed non-technical amendments: 1. Appendix identifies the specific examination and qualifying scores to give effect to the requirements in T-1-11. Adoption of English Competency Examination of the Regulations.

5. Type of Filing

Emergency Rules

A1. Emergency 120-day initial - §42-35-3(b)
☐ Adoption
☐ Amendment of ERLID:
". ☐ Repeal of ERLID:

A2. Emergency 90-day renewal - §42-35-3(b)
☐ Adoption
☐ Amendment
Indicate ERLID of 120-day initial:

Brief Statement of Reason for Finding Imminent Peril §42-35-3(b)(2):

Final Rules

☑ B1. Amendment ☐ B2. Adoption ☐ B3. Repeal ☐ C. Technical Revision

Supersedes ERLID: 6399 Repeals ERLID: Expires ERLID:

If B1 or C, please indicate new, amended, deleted, or revised sections:

6. Notice and Hearing Information
Date of Public Notice - §42-35-3(a)(1):04/29/2011
Date of Public Hearing - §42-35-3(a)(2):Hearing Not Required
End of Comment Period:05/31/2011

7. Agency Additional Information - Web Page
http://www.ride.ri.gov

8. Certification

I hereby certify that the attached rules and regulations were adopted in accordance with the Administrative Procedures Act (42-35) and that they are true copies of this Department, attest,

_____
Name

_____
Title

_____
Notary Public

Subscribed and sworn before me
this_____ day of _____, _____