July 22, 2009

Freedom of Information Office
State Board of Education
100 North First Street
Springfield, IL 62777
ATTN: FOIA Request

Dear FOIA Officer:

Pursuant to the Illinois Freedom of Information Act, 5 ILCS 140/1 et seq., and the regulations found at 2 IL. Admin. Code Part 5001, we respectfully request, from the Illinois State Board of Education and all its divisions, information on the following (as well as copies of any and all documents supporting such information):

1. On the date you respond to this letter, the total number of persons approved by ISBE as an educational interpreter, and a breakdown of this number as follows:
   a. number of persons approved by ISBE as an initial sign language educational interpreter;
   b. number of persons approved by ISBE as a standard sign language educational interpreter;
   c. number of persons approved by ISBE as a master sign language educational interpreter;
   d. number of persons approved by ISBE as an emergency sign language educational interpreter;
   e. number of persons approved by ISBE as an initial cued speech educational interpreter;
   f. number of persons approved by ISBE as a standard cued speech educational interpreter;
   g. number of persons approved by ISBE as a master cued speech educational interpreter; and
   h. number of persons approved by ISBE as an emergency cued speech educational interpreter.
2. On the date you respond to this letter, the total number of persons who applied to ISBE and sought to be approved as an educational interpreter.

3. On the date you respond to this letter, the names of every person who is approved as an educational interpreter, and further:
   a. Each person’s level of approval as an educational interpreter (i.e., initial, standard, master, or emergency);
   b. Each person’s choice for the type of interpreter for which approval is sought (i.e., sign language or cued speech); and
   c. For each approved educational interpreter, the name of the Regional Superintendent that requested the State Board of Education to review the application of the interpreter.

4. On the date you respond to this letter, the name and district number of every school district that employs an approved educational interpreter according to the information in response to the first inquiry in this letter, and further:
   a. The number of approved educational interpreters employed with each named school district; and
   b. The name of each approved educational interpreter employed with each named school district

5. On the date you respond to this letter, the number of deaf and hard of hearing students as follows:
   a. The number of all deaf and hard of hearing students enrolled at schools in Illinois, pursuant to the Funding and Child Count Tracking System ("FACTS") and/or any other data or information;
   b. The number of deaf and hard of hearing students in each school district that is their resident school, as reported to ISBE through FACTS and/or any other data or information;
   c. The number of deaf and hard of hearing students placed in each serving district, as reported to ISBE through FACTS and/or any other data or information; and
   d. The number of deaf and hard of hearing students placed in each serving school, as reported to ISBE through FACTS and/or any other data or information.
6. Copies of all submitted “Requests for Approval or Renewal as an Educational Interpreter” with private information redacted but providing the following necessary information: name, interpreter choice of communication mode (sign language or cued speech); type of application (initial, standard, master, or emergency); and Regional Superintendent’s signature and date.

Because we are a not-for-profit agency serving the public and this FOIA request is in the public interest (and not for commercial or personal benefit), we request that you waive all costs pursuant to Section 6(b) of the IFOIA as well as Section 5001.510(c) of the regulations. Failure to respond to this request within seven (7) working days shall be considered a denial and we will proceed accordingly.

If you refuse to waive costs associated with this request or need further clarification, please contact me at (312) 895-7250 before sending the documents to my attention. Thank you.

Sincerely,

Howard A. Rosenblum
Senior Attorney