

WRITTEN EVALUATION FORM

Upon review of the educational activities of the pupil named below, I have found that the pupil has demonstrated progress at a level commensurate with his/her ability.

Joy Paleles

Signature of Florida Certified Teacher/Evaluator

548079

Certification Number

June 30, 2025

Date of Expiration

Pupil's Name: *Rory Luzier*

Pupil's Birthdate: *May 26, 2006*

Pupil's Address: *19107 New Port Sound Place*

New Smyrna Beach, FL 32168

Pupil's Parent(s)
or Guardian(s):

Johanna Luzier (mom)

May 27, 2024

Evaluation Date

State of Florida Department of Education

EDUCATOR CERTIFICATE

This Certifies That

JOY ELLEN PALELIS

Has satisfactorily completed all requirements of Florida Statutes and State Board of Education Rules for the coverages or endorsements listed below:

PROFESSIONAL	ENGLISH FOR SPEAKERS OF OTHER LANGUAGES	ENDORSEMENT	07/01/2015 - 06/30/2025
PROFESSIONAL	EARLY CHILDHOOD EDUCATION	NURSERY THROUGH KINDERGARTEN	07/01/2015 - 06/30/2025
PROFESSIONAL	ELEMENTARY EDUCATION	GRADES 1-6	07/01/2015 - 06/30/2025

Department of Education Number 548079

Paul O. Burns
Deputy Chancellor for Educator Quality
861966

Richard Corcoran
Commissioner of Education
Issued: June 12, 2020

