

**Stephenville Independent School District
Stephenville, Texas
Application for Expedited and General State Waivers**

Section 1: Please complete this section for all waivers.

District Name: Stephenville Independent School District County/District No. 072903
Address: 2655 West Overhill Drive Telephone No. 254-968-7990
City, State, Zip: Stephenville, Texas 76401 Fax No. 254-968-5942
Contact: Kathy Hampton Telephone No. 254-968-7990
Email: kathy.hampton@s ville.us

Section 2: Please complete this section for all waivers.

Superintendent:

☒ Dr. ☐ Mr. Matt Underwood _____
☐ Mrs. ☐ Ms. _____ Name Signature

Board President: Dr. Ann Calahan _____
Name Signature

Date Board Approval: _____

Board Vote: For _____ Against _____ Abstain _____ Absent _____

Section 3: Please complete this section for all waivers.

Comments of appropriate Site-Based Decision Making Committee: Site Base team will discuss when they return to work. _____

SISD Board President Signature: _____

Section 4:

☐ **Other Waiver-Waiver from the Educator Appraisal Requirements due to circumstances arising from COVID-19. TEC, §21.351 and §21.352, or TEC, §21.3541, and the applicable rules in Title 19, Texas Administrative Code, Chapter 150**