



UNITED INDEPENDENT SCHOOL DISTRICT AGENDA ACTION ITEM

TOPIC Approval of Application for Missed Instructional Days Waiver for the 2012-2013 School Year

SUBMITTED BY: Gloria S. Rendon **OF:** Superintendent's Office

APPROVED FOR TRANSMITTAL TO SCHOOL BOARD: _____

DATE ASSIGNED FOR BOARD CONSIDERATION: January 16, 2013

RECOMMENDATION:

It is recommended that the United ISD Board of Trustees approve the following Missed Instructional Days Waiver for the following campuses:

Ruiz Elementary: October 28, 2012

The Pre-kinder afternoon classes did not meet due to school wide dismissal

United High School: December 17, 2012

Matias De Llano: December 17, 2012

Both of these campuses were affected by power outage. Classes did not convene at these campuses.

RATIONALE:

BUDGETARY INFORMATION

BOARD POLICY REFERENCE AND COMPLIANCE:



APPLICATION FOR MISSED INSTRUCTIONAL DAYS

2012-2013 SCHOOL YEAR

General Instructions. For Instructional Days Missed Due to Weather, Health or Safety Issues, please complete Sections 1, 2, 3, and 4. **Bolded** items in Section 2 and Section 3 must be completed. Please direct questions to the State Waiver Unit at (512) 463-9630 or www.tea.state.tx.us/waivers. **Application due no later than June 25, 2011.**

SECTION 1. PLEASE COMPLETE THIS SECTION.

District Name: <u>United Independent School District</u>	County/District No. <u>240 - 903</u> Telephone No. <u>(956) - 473 - 6201</u>
Campus Name: <u>Alicia Ruiz Elementary</u>	Campus No. <u>240903 - 115</u>
Address: <u>201 Lindenwood Dr.</u>	Fax No. <u>(956) - 728 - 8691</u>
City, State, Zip: <u>Laredo, TX 78045</u>	
Contact Person: <u>Gloria S. Rendon</u>	Telephone No. <u>(956) - 728 - 8691</u> Email: <u>grendon@uisd.net</u>

SECTION 2. PLEASE COMPLETE THIS SECTION.

Superintendent: Roberto J. Santos _____ Signature _____
 Dr. Mr. Typed Name
 Mrs. Ms.
 Board President: Judd Gilpin _____ Signature _____
 Typed Name
Date Board Approval: January 16, 2013
Board Vote – For _____ **Against** _____ **Abstain** _____ **Absent** _____

SECTION 3. PLEASE COMPLETE THIS SECTION FOR ALL WAIVERS.

Comments of appropriate Site-Based Decision Making Committee: Committee approved waiver request

SBDM Committee Chairperson Signature _____

SECTION 4. PLEASE COMPLETE THIS SECTION FOR DATES AND REASONS FOR DAYS MISSED.

Missed Instructional Days, pursuant to TEC §25.081. Allows the district or campus to request a waiver if instructional days are missed due to weather, health, or safety related issues be excused. The first two days missed for any reason **must** be made up.

Reason	Date(s) (mm/dd/yy)	Explanation
<input type="checkbox"/> Weather	_____	_____
<input type="checkbox"/> Health	_____	_____
<input checked="" type="checkbox"/> Safety	<u>10-29-2012</u>	<u>Earlier this school day, the campus experienced an electrical fire in one of the portables. Due to this, the electricity was shut off affecting the entire complex. The PM Pre-Kinder Classes were cancelled.</u>
<input type="checkbox"/> Other	_____	_____

ALL APPLICATIONS SHOULD BE MAILED OR FAXED NO LATER THAN June 25, 2013. THE FAX NUMBER IS (512) 475-3666.

State Waiver Unit | Texas Education Agency | 1701 North Congress Avenue | Austin, TX 78701-1494 | Phone (512) 463-9630



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Campus Name: <u>United High School and Dellano</u>	Campus No. <u>240903-001 and 240-903-116</u>
Address: <u>201 Lindenwood Dr.</u>	Fax No. <u>(956) - 728 - 8691</u>
City, State, Zip: <u>Laredo, TX 78045</u>	
Contact Person: <u>Gloria S. Rendon</u>	Telephone No. <u>(956) - 728 - 8691</u> Email: <u>grendon@uisd.net</u>

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Reason	Date(s) (mm/dd/yy)	Explanation
<input type="checkbox"/> Weather	_____	_____
<input type="checkbox"/> Health	_____	_____
<input checked="" type="checkbox"/> Safety	<u>12-17-2012</u>	<u>After a high wind storm, we received a report of a power outage affecting these two campuses. After communicating with AEP, we were advised that the repair would take more than 3 hours; therefore, classes were cancelled.</u>
<input type="checkbox"/> Other	_____	_____

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