TEXAS EDUCATION AGENCY STATE WAIVERS

APPLICATION FOR EXPEDITED AND GENERAL STATE WAIVERS

General Instructions. For Expedited Waivers, please complete Sections 1, 2, 3, and 4. For General State Waivers, please complete Sections 1, 2, 3, 6, and 7. 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.

SECTION 1. PLF	ASE COMPLETE TH	IS SECTION FOR	III MANTEDO	
District Name:	Keller ISD	IS SECTION FOR A		
Address:	350 Keller Parkwa	21/	County/Dis	trict No. 220 - 907
Addition.	Keller, TX 76087	ду	Telephone	1
Contact Boroom			Fax No.	(<u>817</u>) - <u>337</u> - <u>3299</u>
Contact Person.	William Newton		Telephone	No. (817) - 744 - 1060
SECTION 2 PLE	ASE COMPLETE TH	IS SECTION FOR A	LL WAREEDO	
Superintendent:	James Veitenheime	SECTION FOR A	ILL WAIVERS.	
- Caparintonidant.	Typed Name		_	
Doord Descident				Signature
Board President				
75 W NES - 2008	Typed Name		No.	Signature
Date Board App	oroval:		Board Vote	- For _ Against _ Abstain _ Absent _
SECTION 3 PLE	ASE COMPLETE TH	IS SECTION FOR A		
Comments of a	ppropriate Site-Ba	sed Decision Ma	king Committee	
		our projection inc	ming committee.	
SRDM Committe	ee Chairperson Si	anatura		
SDDW COMMING	ee Chairperson Si	gnature		
	EDITED WAIVERS.			
Maximum of three Please check the Please check the Maiver, pursuan reading/english is Essential Knowled Please check no Reading/English Please check the Staff Develop This waiver allow	aff on various educate days of student in a years requested: lish Language Arts to TEC §25.081. anguage arts, mathedge and Skills in lie more than two subjects Language Arts 1 a years requested:	ational strategies of astruction. Please	designed to improstate the number \(\times 2006-2007 \) Science; and/or state district to coror social studies sof two days of studies and the district one day each: \(\times 2006-2007 \) ble Conferences	C) §25.081. This waiver allows the we student performance in lieu of a of days requested. 3
	years requested:		□2006-2007	□2007-2008
				11 - 15 - 15 - 15 - 15 - 15 - 15 - 15 -
than seven (7) ho	ours for a total of six nd/or to provide time	(6) days of stude	nt instruction to p	s the district to conduct school for less rovide additional training in educational I local communities. Please state the
	years requested:	⊠2005-2006	⊠2006-2007	⊠2007-2008
to modify the sch	edule/TAKS Testir edule of classes on riods. This waiver is	TAKS testing day	s during the curre	25.082. This waiver allows the district ent school year to reduce interruptions

wa Pho equ	iver allows the district reimbursement for				
1 10	ase check the years request. \(\subseteq 2005-200	06 □2006-2007 □2007-2008			
Dis use edu nee sub one Edu filin	cration programs established under Section 37 adding to exceed the 18% limit and to report the agroup, not making satisfactory progress under year and the waiver must be renewed in writing action Agency waiver office for each subsequence.	pursuant to TEC 37.008(g). This waiver allows the district to to provide basic services for disciplinary alternative 7.008. The school district is required to state the reason for number of students in each grade level, by demographic the state's assessment system. This waiver is granted for ng prior to the start of the school year through the Texas ent year, in accordance with TEA policies and deadlines for trict's SCE allotment that is being requested to provide basic			
050	TION OF THE PARTY				
Ple	CTION 6. PLEASE COMPLETE THIS SECTION FO ase check one:	DR GENERAL WAIVERS.			
	course Requirement disciplinary Alternative Education Campus oreign Exchange Student other Specify	□ Pregnancy Related Services Break-In-Service □ Pregnancy Related Services On-Campus CEHI □ Study of Electronic Courses			
PLE	EASE USE SEPARATE PAGE.	ALL WAIVERS OTHER THAN EXPEDITED WAIVERS.			
1. 2.	Give a brief narrative description of the requested waiver. Does the district or campus plan reflect the need for this waiver? If yes, what is the specific objective impacted by the waiver?				
3.	3. Cite the Texas Education Code or the Texas Administration Code that the district or campus wishes to waive?				
4.	manufacture production and in the in-	vaiver is granted.			
5.	5. How will granting this waiver help achieve the district or campus's objective?				
6.	Please explain how the school district or campus will evaluate the impact of the waiver towards meeting the district or campus's goal.				
7.	Please specify the school years for which the	waiver is requested, to a maximum of three years. 2006-2007 2007-2008			

All applications should be mailed or faxed. 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