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/training/CDD-106R03.pdf.

SECTION 1. PLEASE COMPLETE THIS SECTION FOR ALL WAIVERS.							
District Name	Ector County ISD		County/Distric	t No. 068 - 901			
Address	PO Box 3912		Telephone No.				
Addiess	Odessa, TX 79760		Fax No.	(432) 334-7146			
Contact Person	Sue Ferguson		Telephone No.				
Contact Ferson _	Sue reiguson		relephone No.	(432) 334-7107			
SECTION 2. PLEASE COMPLETE THIS SECTION FOR ALL WAIVERS.							
	D CD '1						
Superintendent	Roy C. Benavides	 		<u> </u>			
	Typed Name		S	ignature			
Board President	Delma J. Abalos						
	Typed Name		S	ignature			
Date Board Appr	oval						
SECTION 3. PLEA	SE COMPLETE THIS SECTION	ON FOR ALL WAIVERS	_				
Comments of appropriate Site-Based Decision Making Committee:							
			•				
			•				
SBDM Committe	e Chairperson Signature		•				
DDDIVI COMMITTEE	- Chair person Signature_						
	DITED WAIVERS. PLEASE						
				is waiver allows the district			
to train staff on var	rious educational strategies	s designed to improve st	udent performan	ce in lieu of a maximum of			
three days of stude	ent instruction. Please state t	he number of days requ	ested				
Please check the y	ears requested:	□2003-2004	□2004-2005	□2005-2006			
•	1						
☐ Reading/English Language Arts; Mathematics; Science; and/or Social Studies Staff Development Waiver,							
	25.081. This waiver allows						
	hematics, science, or social						
			d with the Texas	Essential Knowledge and			
	naximum of two days of stu			•			
Please check the n	umber of days requested: I		uage Arts				
□Mathematics	□Science	□Social Studies					
Please check the y	ears requested:	□2003-2004	□2004-2005	□2005-2006			
01 0030			***				
	nent through Participation						
		ole conferences for staff	development to	improve student performance			
in lieu of one day	of student instruction.			('			
Please check the y	ears requested:	□2003-2004	□2004-2005	□2005-2006			
-	_						
□ Early Release V	Waiver, pursuant to TEC 83	25 082 This waiver all	ows the district t	o conduct school for less than			
□ Early Release Waiver, pursuant to TEC §25.082. This waiver allows the district to conduct school for less than seven (7) hours for a total of six (6) days of student instruction to provide additional training in educational							
methodologies and/or to provide time to meet the needs of students and local communities. Please state the number							
of days requested							
	···		-2004 2005	-2005 2006			
Please check the y	ears requested:	□2003-2004	□2004-2005	□2005-2006			
\ /							
Modified Schee	dule/TAKS Testing Days V	Vaiver, pursuant to TEC	C §25.082. This	waiver allows the district to			
modify the schedule of classes on TAKS testing days during the current school year to reduce interruptions during							
testing periods. This waiver is approved yearly.							

SECTION 4. EXPEDITED WAIVERS. PLEASE CHECK ALL THAT APPLY. Textbooks for Advanced Placement and International Baccalaureate, Pursuant to TEC §7.056. This waiver allows the district reimbursement for the purchase of textbooks used in Advanced Placement and International Baccalaureate courses for which no textbooks were adopted by the state.									
Please check the years requested:	□2003-	•	□2004-2005	□2005-2006					
□ Textbooks for College Courses, Pursuant to TEC §7.056. This waiver allows the district reimbursement for the purchase of non-state adopted textbooks used in dual credit courses in which the student receives state graduation credit and post-secondary education credit. Please check the years requested: □2003-2004 □2004-2005 □2005-2006									
□ Textbooks for Photojournalism and Astronomy, Pursuant to TEC §7.056. This waiver allows the district reimbursement for the purchase of non-state adopted textbooks used in Photojournalism and Astronomy courses for which no textbooks were adopted by the state. Reimbursement is equal to the state maximum cost or the cost of the textbook, whichever is lowest. Please check the years requested: □2003-2004 □2004-2005 □2005-2006									
SECTION 5. GENERAL WAIVER. Disciplinary Alternative Education Programs, pursuant to TEC 37.008(g). This waiver allows the district to use more than 18% of the district's SCE allotment to provide basic services for disciplinary alternative education programs established under Section 37.008. The school district is required to state the reason for needing to exceed the 18% limit and to report the number of students in each grade level, by demographic subgroup, not making satisfactory progress under the state's assessment system. This waiver is granted for one year and the waiver must be renewed in writing prior to the start of the school year through the Texas Education Agency waiver office for each subsequent year, in accordance with TEA policies and deadlines for filing. Please state the total percentage of the district's SCE allotment that is being requested to provide basic services at the DAEP.									
SECTION 6. PLEASE COMPLETE T	HIS SECTION FOR GENER	RAL WAIV	ERS.						
Please check one:									
□Course Requirement	□Foreign Exchange Stud	ent	□ Disc	ciplinary Alternative					
□Pregnancy Related Services	□Study of Electronic Co	ırses	Edu	cation Campus					
□Other Specify									
SECTION 7. COMPLETE THIS SECTION FOR ALL WAIVERS OTHER THAN EXPEDITED WAIVERS. PLEASE USE SEPARATE PAGE.									
 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? Cite the Texas Education Code or the Texas Administration Code that the district or campus wishes to waive? 									
 Describe the plan to be implemented, if the waiver is granted. How will granting this waiver help achieve the district or campus's objective? Please explain how the school district or campus will evaluate the impact of the waiver towards meeting the district or campus's goal. Please specify the school years for which the waiver is requested, to a maximum of three years. 									

All applications should be mailed or faxed. The fax number is (512) 475-3666.

□2004-2005

□2005-2006

□2003-2004

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

CDD-106R03