Texas Education Agency Request for Maximum Class Size Waiver

Spring Semester (2007-2008 School Year)

District Name: Address:	Ector County ISD P.O. Box 3912 Odessa, TX 79760		068 <u>901</u> County-District N umber		Acceptable Current District						
			-	Accountability Rating							
Education Agen §39.183.)	o available on-line at cy, State Waiver Uni ssary to submit this	t, 1701 North Congre	tx.us/taa/comm12120 ess Avenue, Austin, TX ver is needed.	<u>7-a1.doc</u> . X 78701-1	Completed 494 or Fa	d forms m x: 512-475	ust be sub i-3666. (T	mitted in h his report	ard copy t is authoriz	o the Texas ed under TEC	
Total Number of	District Sections That	t Exceed 22:1 Class S		ampus inform	ation.)						
	Campus Name(s)	Campus No.	Campus Accountability Rating	Total Sections (K)	Total Sections (1)	Total Sections (2)	Total Sections (3)	Total Sections (4)	Total K-4 Sections	Reason(s) {F=Facilities T=Teachers G=Unanticipated Growth}	
Noel Elementary		124	Acceptable	4		1	2		7		
Pease Elementary		117	Acceptable			5			5		
Sam Houston I	Elementary	113	Recognized			1	_		1		
				_							
District Totals.				12	4	11	7	5	39		
surveys for Grad sections and the The waiver red local board of	des K-4, enter the ca e reason(s) for the wa quest must be subn trustees. The plan	mpus name and cam aiver request. Class nitted by February must include the n	ndergarten through G npus number for each size limits do not appl 22, 2008, and mus ame(s) of campus(e t into compliance; tin	campus in y to physic t include es), camp	which the cal education a curren us rating,	class size on or fine t complia grade(s)	e ratio exce arts classe ance plar and num	eeds 22:1. es. in that has liber of se	Enter the been apportions exe	proved by the ceeding a 22:1	
plan was previ	ously submitted); a	nd specific reasons	s that noncompliand forts to recruit and h	e must be	e address	ed. In ac	ldition, dis	stricts tha	t request	a waiver due	
Hector Mendez Type Name of Superintendent Dr. Mr. Mrs. Ms. Carol Gregg					 For		nst A	bstain	_ Absent		
Type Name of Board President Si		Signature of Boar	Signature of Board President		Date of Board Approval			Board Vote			
Wendy Hines (432) 334-7107		er (432) 331 Fax Numb					_		0DD 455		
Type Name of Contact Person Telepho		Telephone Numb	one Number		er					CDD-105	