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

Section 1:	Please complete this section for	r all waivers.		
District Name: _	Stephenville Independent Schoo	1 District	County/District No	o. <u>072903</u>
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@sville.us			
Section 2: Superintendent:	Please complete this section for	r all waivers.		
$\checkmark$ Dr. $\square$ Mr. $\square$ Mrs. $\square$ Ms.	Dr. Eric Cederstrom Name	<u> </u>		Signature
Board President:	Dr. Robert Barberee			
	Name		S	Signature
Date Board App	oroval:			
<b>Board Vote:</b>	For Again	inst	Abstain A	Absent
Section 3: Comments of ap	Please complete this section for opropriate Site-Based Decision-		tee: There was a conse	ensus of the
District SBDM (	Committee to apply for the waiver.	•		
SISD Board Pro	esident Signature:			
Section 4:				

## **Class Size Waiver Request-Third Grade classes**

✓ A district must submit a request for a class size exception for any classrooms in pre-kindergarten - fourth grade that exceeds the 22 students class size limit (Texas Education Code §25.112). A district seeking an exemption must notify the commissioner and apply for the exemption not later than the later of (1) October 1; or 2) the 30th day after the first school day the district exceeds the limit. Note: class size limits do not apply to physical education classes or fine arts classes.