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# Waivers

## 2019-2020 Application for Other Waiver

Waiver ID: 52301

**Application Information** 

Category: General

Creator: Larry Haynes, District Editor

Status: Draft

Creation Date: 5/11/2020

Approving Superintendent:

Assigned To: Larry Haynes

**LEA Contact** 

Full Name: Larry Haynes

Phone: (409) 882-5556
Email: lhay@woccisd.net

LEA Information

LEA: WEST ORANGE-COVE CISD (181906)

Address: P O BOX 1107, ORANGE, TX 77631-1107

Phone: (409) 882-5437

Date	FIFA	Roard	of Trustees	Approval
Date	1 1 1 1 1 1 1	LINUALLU	OI HIUNIECS	AUUIUVAI

Date:

#### **Special Instructions**

This waiver allows districts and charter schools to request a waiver of a requirement, restriction, or prohibition imposed by the Texas Education Code (TEC) or rule of the board or commissioner, except as prohibited by TEC § 7.056 (e).

### Waiver Description

#### Enter a brief waiver description:

Waiver from the CPR instruction requirement due to COVID-19

## **General Questions**

1. Give a brief narrative description of the requested waiver.

Waiver from the CPR instruction requirement due to COVID-19

2. Does the district or campus plan reflect the need for this waiver? If yes, what is the specific objective impacted by the waiver?

NA

3. Cite the section(s) of the Texas Education Code or the Texas Administrative Code that the district or campus wishes to waive.

TEC 28.0023 and applicable rules in TAC 74.38

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4. Describe the plan to be implemented, if the waiver is granted.	
NA NA	
5. How will granting this waiver help achieve the district's or campus' objective?	
NA NA	
6. Please explain how the school district or campus will evaluate the impact of the waiver towards meeting the district's or campus' goal.	
NA	
Requested Years	
2019-2020	
LEA Attachments (0)	
There are no LEA attachments.	
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