

## Section 42.8. Requirements for Exemption.

A. A school district may develop an educational improvement plan which includes exemption for the educational-related statutory requirements set forth in subsections C of this section and State Board of Education rules for the school district, a school site or any program, grade level, consortium of schools or school districts or other group within the school district. The board of education of the school district shall, through adoption of a resolution, approve the plan prior to application being made to the State board of Education.

B. Each educational improvement plan approved by the State Board of Education shall include the following components:

1. A description of the educational benefits to be derived;
2. A definition of the standards of the plan;
3. Development of definitive work products, such as site improvement plans and progress reports;
4. Demonstration of collaboration by teachers, administrators, higher education representatives, students, parents/families, and the community;
5. Development and the use of an assessment mechanism to determine progress in meeting the goals and objectives of the plan;
6. Development of an in-service training plan to be provided to personnel at the site who will participate in the project;
7. Report on the results of the plan to the State Board of Education and provision of appropriate technical assistance to other school districts and the State Department of Education as required; and
8. Explanation of how the plan will affect other schools, program or sites in the district.

C. Each educational improvement plan shall include a list of the specific educational-related statutory requirements and State Board of Education rules the school district is requesting an exemption from and why each exemption is necessary to success of the plan. The school district shall not be granted an exemption from federal educational-related requirements. A school district may request an exemption from any statutory requirement or State Board of Education rule not related to bilingual and special education programs, health and safety provisions, school finance, State Aid, pupil formula weights, teacher salary and teacher retirement, the Oklahoma School Testing Program, the Oklahoma Educational Indicators Program and the teacher preparation, examination, licensure, certification, residency and professional development system. The State Board of Education may grant district-wide exemptions from certification requirements for Library Media Specialist to districts experiencing a shortage in this area. The State Board of Education may grant an exemption from certification requirements for superintendents to any district with an unweighted average daily membership over twenty-five thousand (25,000). (70-3-126)



OKLAHOMA STATE DEPARTMENT OF EDUCATION

Deregulation/Statutory Waiver Application Worksheet

\*\* SCHOOL YEAR 2015-2016\*\*\*\*

**Superintendent:** Bret Towne  
**District Name:** Edmond  
**School Name:** Cleghern Elem.  
**RAO:** LeGay Riggs  
**O.A.C. Number:**  
**Statute Number:** 70 OS 3-126

**County:** Oklahoma  
**Date Received:** July 17, 2015  
**Date of Application:**

	Yes	No	NA	Need
<b>Correct Form:</b>	X			
<b>Correct Standard Stated:</b>	X			
<b>Principal's Signature:</b>	X			
<b>Superintendent's Signature:</b>	X			
<b>Board President's Signature:</b>	X			
<b>Notary with Seal:</b>	X			
<b>Equivalency/Letter of Explanation:</b>	X			
<b>Bell Schedule:</b>				
<b>School Calendar:</b>				
<b>Contract(Library/Counseling):</b>				

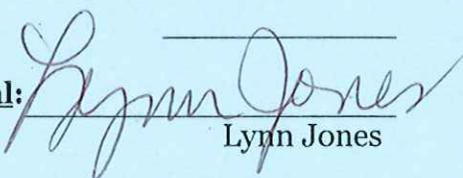
**Focus, Priority, Targeted Intervention school-**

Enrollment

<b>High School</b>	6819
<b>Middle/Junior High School</b>	4995
<b>Elementary School</b>	11206 -
	389
	Cleghern
<b>Total Enrollment</b>	23020

**Description:** Requesting waiver to allow a teacher to obtain her Library Media degree and certificate while operating the library  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Board Month:** August 2015

**Approval:**   
 Lynn Jones

Abbreviated Day/COOP  
 Approved via e-mail(attached)

**Project Year:** 3 of 3  
**School Year:** 2015-2016  
**Timeline:** \_\_\_\_\_  
**CC:** \_\_\_\_\_

**Notification**  
 Superintendent \_\_\_\_\_ will attend  
 Principal \_\_\_\_\_ will attend

# SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

## for 20 15 – 20 16 school year

Oklahoma  
COUNTY

Edmond School District  
SCHOOL DISTRICT

1001 W. Danforth Edmond, OK 73003  
SCHOOL DISTRICT MAILING ADDRESS

Clegern Elementary  
NAME OF SITE

*Zari Cowden-Draper*  
PRINCIPAL SIGNATURE\*

7-16-15  
DATE

PRINCIPAL SIGNATURE\*

DATE

PRINCIPAL SIGNATURE\*

DATE

Mr. Bret Towne  
SUPERINTENDENT NAME (PLEASE PRINT)

RECEIVED  
ACCREDITATION

**bret.towne@edmondschools.net**

JUL 17 2015

SUPERINTENDENT E-MAIL ADDRESS

STATE DEPT. OF EDUCATION

*Bret Towne*  
SUPERINTENDENT SIGNATURE\*

7-16-15  
DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on July 16, 20 15

*Jamie Woodward*  
BOARD PRESIDENT SIGNATURE\*  
VICE

NOTARY SEAL →

*Stacy Pendergraft*  
NOTARY

7-16-15

DATE

**2-9-2019 #07001423**

COMMISSION EXPIRATION DATE

**Statute/Oklahoma Administrative Code to be Waived:**  
(specify statute or OAC (deregulation) number: (see instructions))

\*Original signatures are required. The attached questionnaire must be answered to process.\*\*

### SDE USE ONLY

PROJECT YEARS

14 of 17  
3 3

ENROLLMENT

6819 High School

4996 Jr./Middle High

11 200 Elementary

2,9020 District Total

DATE RECEIVED

70 O.S. 3-126

OAC

*Silvany Medina Speer*

OKLAHOMA STATE DEPARTMENT OF EDUCATION

Deregulation/Statutory Waiver Application Worksheet

\*\* SCHOOL YEAR 2015-2016\*\*\*\*

**Superintendent:** Randy Davenport      **County:** Hughes  
**District Name:** Holdenville      **Date Received:** July 9, 2015  
**School Name:** Ethel Reed ES and Thomas Middle  
**RAO:** Kelly Bowen      **Date of Application:**  
**O.A.C. Number:**  
**Statute Number:** 70 OS 3-126

	Yes	No	NA	Need
<b>Correct Form:</b>	x	_____	_____	_____
<b>Correct Standard Stated:</b>	x	_____	_____	_____
<b>Principal's Signature:</b>	x	_____	_____	_____
<b>Superintendent's Signature:</b>	x	_____	_____	_____
<b>Board President's Signature:</b>	x	_____	_____	_____
<b>Notary with Seal:</b>	x	_____	_____	_____
<b>Equivalency/Letter of Explanation:</b>	x	_____	_____	_____
<b>Bell Schedule:</b>	_____	_____	_____	_____
<b>School Calendar:</b>	_____	_____	_____	_____
<b>Contract(Library/Counseling):</b>	_____	_____	_____	_____

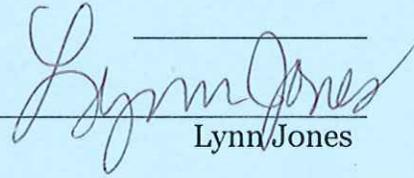
**Focus, Priority, Targeted Intervention school-**

**Enrollment**

<b>High School</b>	279
<b>Middle/Junior High School</b>	310
<b>Elementary School</b>	539
<b>Total Enrollment</b>	1128
	786 - 2
	schools

**Description:** Requesting waiver to allow teacher to obtain Library Media Specialist degree and certificate while operating library  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Board Month:** August 2015

**Approval:**   
 Lynn Jones

Abbreviated Day/COOP  
 Approved via e-mail(attached)

**Project Year:** 3 of 3  
**School Year:** 2015-2016  
**Timeline:** \_\_\_\_\_  
**CC:** \_\_\_\_\_  
 \_\_\_\_\_

**Notification**  
 \_\_\_\_\_ will attend  
 \_\_\_\_\_ will attend

OKLAHOMA STATE DEPARTMENT OF EDUCATION

ACCREDITATION DIVISION  
2500 North Lincoln Boulevard, Suite 210  
Oklahoma City, Oklahoma 73105-4599  
(405) 521-3333

SCHOOL SITE STATUTORY WAIVER/EXEMPTION APPLICATION  
FOR 2015-2016 SCHOOL YEAR

Name of Site(s): Ethel Reed Elementary  
Thomas Middle School

Name of School District: Holdenville

Signature of Principal(s): \*Danielle Patterson Date 6-15-15

*[Signature]* Date 6-15-15

\_\_\_\_\_  
Date \_\_\_\_\_

Signature of Superintendent: \* *[Signature]* Date \_\_\_\_\_

County Name: Hughes

I hereby certify that this deregulation application was approved by our local board of education at the meeting on June 8, 2015

\_\_\_\_\_  
Signature of Board President\* *[Signature]*

Notary: *Peggy O'Kelley*  
Date: 6-8-15 My Commission Expires 11/06/2017



**SDE USE ONLY**

PROJECT YEARS  
3 of 3

ENROLLMENT

High School	219
Jr./Middle High	310
Elementary	539
<b>District Total</b>	<b>1128</b>

Date Received July 9, 2015

70 O.S. 3-126

1. **Statement of the Statute to be Waived:** (specify statutory citation)

Holdenville Schools is requesting a statutory waiver of O.S. 70. 3-126 for a teacher to receive her degree in Library media.

RECEIVED  
ACCREDITATION  
JUL 09 2015

*Library Media Specialist*

STATE DEPT. OF EDUCATION

\*Original signatures are required.

A. A description of the educational benefits to be derived (i.e., describe specific benefits to learning/achievement).

Due to the lack of Certified Library media specialist, Holdenville Schools is requesting a Statutory Waiver for 70 O.S. 3-126 for Mrs. Turner. Mrs. Turner is a Certified Reading Specialist who is willing to continue her education by getting her degree in Library media. This will allow the district to meet Accreditation Standards in this area.

B. A definition of the standards of the plan (i.e., alternate strategies proposed).

The alternative plan will allow the sites to have a Knowledgeable person in the Library. The Library is an important part of our reading programs. The waiver for O.S. 70 3-126 will allow Mrs. Turner time to complete her degree in Library media.

C. Development of definitive work products, such as site improvement plans and progress reports (i.e., describe the expected student performance levels to be demonstrated or results of the Statutory Waiver).

The Library is an intregal part of our reading program. To obtain a Library media specialist is very difficult for our district. Mrs. Turner is excited about the opportunity to continue her education and meet the needs of our children.

OKLAHOMA STATE DEPARTMENT OF EDUCATION

Deregulation/Statutory Waiver Application Worksheet

\*\* SCHOOL YEAR 2015-2016\*\*\*\*

**Superintendent:** Ronal Flanagan  
**District Name:** Muldrow  
**School Name:** Muldrow Elem  
**RAO:** Larry Stogner  
**O.A.C. Number:**  
**Statute Number:** 70 OS 3-126 – Library Media Specialist

**County:** Sequoyah  
**Date Received:** June 11, 2015  
**Date of Application:**

	Yes	No	NA	Need
<b>Correct Form:</b>	x			
<b>Correct Standard Stated:</b>	x			
<b>Principal's Signature:</b>	x			
<b>Superintendent's Signature:</b>	x			
<b>Board President's Signature:</b>	x			
<b>Notary with Seal:</b>	x			
<b>Equivalency/Letter of Explanation:</b>	x			
<b>Bell Schedule:</b>				
<b>School Calendar:</b>				
<b>Contract(Library/Counseling):</b>				

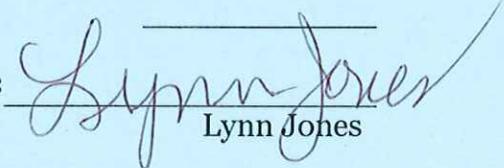
**Focus, Priority, Targeted Intervention school-**

Enrollment

High School	507
Middle/Junior High School	468
Elementary School	590
<b>Total Enrollment</b>	<b>1565</b>

**Description:** Requesting waiver to allow teacher to obtain Library Media degree and certificate while operating the library

**Board Month:** August 2015

**Approval:**   
Lynn Jones

Abbreviated Day/COOP  
 Approved via e-mail(attached)

**Project Year:** 1 of 1  
**School Year:** 2015-2016  
**Timeline:**  
**CC:**

**Superintendent**  
**Principal**

**Notification**  
 will attend  
 will attend

# SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

## for 20 15 – 20 16 school year

Sequoyah

COUNTY

Muldraw Public Schools

SCHOOL DISTRICT

P.O. Box 550 Muldraw, OK 74948

SCHOOL DISTRICT MAILING ADDRESS

Muldraw Elementary School

NAME OF SITE

*Tommy Hall*  
PRINCIPAL SIGNATURE\*

6-4-2015

DATE

PRINCIPAL SIGNATURE\*

DATE

PRINCIPAL SIGNATURE\*

DATE

Ronal Flanagan

SUPERINTENDENT NAME (PLEASE PRINT)

RECEIVED  
ACCREDITATION

JUN 11 2015

ronal.flanagan@staff.muldrawps.org

SUPERINTENDENT E-MAIL ADDRESS

STATE DEPT OF EDUCATION *dl*

June 8, 2015

DATE

*Ronal Flanagan*  
SUPERINTENDENT SIGNATURE\*

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on June 8, 20 15

*Chad Sutton*  
BOARD PRESIDENT SIGNATURE\*

NOTARY SEAL →



*Patty Farmer*  
NOTARY

6-8-15  
DATE

7-9-2015

COMMISSION EXPIRATION DATE

### SDE USE ONLY

PROJECT YEARS

1 of 1

ENROLLMENT

507 High School

408 Jr./Middle High

590 Elementary

1565 District Total

June 11, 2015  
DATE RECEIVED

70 O.S. 3-126

OAC Library Media Spec.

Statute/Oklahoma Administrative Code to be Waived:

(specify statute or OAC (deregulation) number: (see instructions))

700.S. § 3-126

\*Original signatures are required. The attached questionnaire must be answered to process.\*\*

OKLAHOMA STATE DEPARTMENT OF EDUCATION

Deregulation/Statutory Waiver Application Worksheet

\*\* SCHOOL YEAR 2015-2016\*\*

**Superintendent:** Tony Thomas  
**District Name:** Salina  
**School Name:** Elem.  
**RAO:** Mike Teel  
**O.A.C. Number:**  
**Statute Number:** 70 OS 3-126

**County:** Mayes  
**Date Received:** July 20, 2015

**Date of Application:**

	Yes	No	NA	Need
<b>Correct Form:</b>	x	_____	_____	_____
<b>Correct Standard Stated:</b>	x	_____	_____	_____
<b>Principal's Signature:</b>	x	_____	_____	_____
<b>Superintendent's Signature:</b>	x	_____	_____	_____
<b>Board President's Signature:</b>	x	_____	_____	_____
<b>Notary with Seal:</b>	x	_____	_____	_____
<b>Equivalency/Letter of Explanation:</b>	x	_____	_____	_____
<b>Bell Schedule:</b>	_____	_____	_____	_____
<b>School Calendar:</b>	_____	_____	_____	_____
<b>Contract(Library/Counseling):</b>	_____	_____	_____	_____

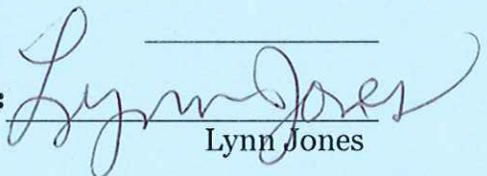
**Focus, Priority, Targeted Intervention school-**

Enrollment

<b>High School</b>	276
<b>Middle/Junior High School</b>	185
<b>Elementary School</b>	355
<b>Total Enrollment</b>	816

**Description:** Requesting waiver to allow teacher to obtain Library Media Specialist degree and certificate while operating library  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Board Month:** August 2015

**Approval:**   
 Lynn Jones

Abbreviated Day/COOP  
 Approved via e-mail(attached)

**Project Year:** 1 of 1  
**School Year:** 2015-2016  
**Timeline:** \_\_\_\_\_  
**CC:** \_\_\_\_\_

**Superintendent**  
**Principal**

**Notification**  
 \_\_\_\_\_ will attend  
 \_\_\_\_\_ will attend

# SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

## for 20 15 – 20 16 school year

Mayes COUNTY Salina Public Schools SCHOOL DISTRICT

PO Box 98 Salina, OK 74365  
SCHOOL DISTRICT MAILING ADDRESS

Salina Elementary  
NAME OF SITE

Honesti Williams PRINCIPAL SIGNATURE\* 7/14/2015 DATE

PRINCIPAL SIGNATURE\* DATE

PRINCIPAL SIGNATURE\* DATE 

Tony Thomas SUPERINTENDENT NAME (PLEASE PRINT) RECEIVED ACCREDITATION 7/14/2015 DATE

Hthomas@salina.k12.ok.us SUPERINTENDENT E-MAIL ADDRESS JUL 20 2015 7/14/2015 DATE  
STATE DEPT. OF EDUCATION

Tony Thomas SUPERINTENDENT SIGNATURE\* 7/14/2015 DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on July 13, 2015

Joby Mann BOARD PRESIDENT SIGNATURE\*

NOTARY SEAL →

Michelle Condit NOTARY Michelle Condit 7/14/2015 DATE

July 22, 2016 COMMISSION EXPIRATION DATE



Statute/Oklahoma Administrative Code to be Waived (specify statute or OAC (deregulation) number: (see instructions))

\*Original signatures are required. The attached questionnaire must be answered to process.\*\*

### SDE USE ONLY

**PROJECT YEARS**  
1 of 1

**ENROLLMENT**

<u>276</u>	High School
<u>185</u>	Jr./Middle High
<u>355</u>	Elementary
<u>816</u>	District Total

July 20 2015  
DATE RECEIVED

70 O.S. 3-126

OAC  
Library/Media Spec

OKLAHOMA STATE DEPARTMENT OF EDUCATION

Deregulation/Statutory Waiver Application Worksheet

\*\* SCHOOL YEAR 2015-2016\*\*

**Superintendent:** Lisa Presley  
**District Name:** Tahlequah  
**School Name:** Greenwood Elem.  
**RAO:** Jeff Colclasure  
**O.A.C. Number:**  
**Statute Number:** 70 OS 3-126

**County:** Cherokee  
**Date Received:** July 17, 201

**Date of Application:**

	Yes	No	NA	Need
<b>Correct Form:</b>	X			
<b>Correct Standard Stated:</b>	X			
<b>Principal's Signature:</b>	X			
<b>Superintendent's Signature:</b>	X			
<b>Board President's Signature:</b>	X			
<b>Notary with Seal:</b>	X			
<b>Equivalency/Letter of Explanation:</b>	X			
<b>Bell Schedule:</b>				
<b>School Calendar:</b>				
<b>Contract(Library/Counseling):</b>				

**Focus, Priority, Targeted Intervention school-**

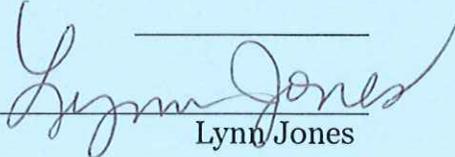
Enrollment

<b>High School</b>	1128
<b>Middle/Junior High School</b>	862
<b>Elementary School</b>	1534
<b>Total Enrollment</b>	3524
	567-
	Greenwood

**Description:** Requesting waiver for a teacher to obtain their Library Media Specialist degree and certification while operating the library

**Board Month:** August 2015

**Approval:**

  
Lynn Jones

Abbreviated Day/COOP  
 Approved via e-mail(attached)

**Project Year:** 3 of 3  
**School Year:** 2015-2016  
**Timeline:**  
**CC:**

**Superintendent**  
**Principal**

Notification

will attend  
 will attend







# SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

## for 20 15 - 20 16 school year

Tulsa

ISD #1 Tulsa Public Schools

COUNTY

SCHOOL DISTRICT

3027 South New Haven Avenue; Tulsa, OK 74114

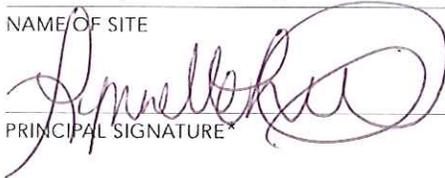
SCHOOL DISTRICT MAILING ADDRESS

McKinley Elementary School

*(545) Priority*

NAME OF SITE

PRINCIPAL SIGNATURE\*



*7/11/15*  
DATE

PRINCIPAL SIGNATURE\*

DATE

PRINCIPAL SIGNATURE\*

DATE

*Deborah A. Gist*

SUPERINTENDENT NAME (PLEASE PRINT)

*gistde@tulsaschools.org*

SUPERINTENDENT E-MAIL ADDRESS



SUPERINTENDENT SIGNATURE\*

*7-24-2015*  
DATE

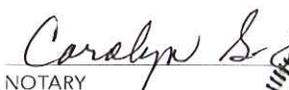
I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on *July 28*, 20 15



BOARD PRESIDENT SIGNATURE\*

*Dr. Lana Turner Addison*

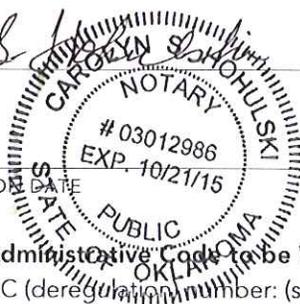
NOTARY SEAL →



NOTARY

*7-28-15*  
DATE

COMMISSION EXPIRATION DATE



Statute/Oklahoma Administrative Code to be Waived:  
(specify statute or OAC (deregulation) number: (see instructions))

\*Original signatures are required. The attached questionnaire must be answered to process.\*\*

### SDE USE ONLY

PROJECT YEARS

\_\_\_\_\_ of \_\_\_\_\_

#### ENROLLMENT

\_\_\_\_\_ High School

\_\_\_\_\_ Jr./Middle High

\_\_\_\_\_ Elementary

\_\_\_\_\_ District Total

DATE RECEIVED

70 O.S. \_\_\_\_\_

OAC \_\_\_\_\_

# SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

## for 20 15 – 20 16 school year

Tulsa

COUNTY

ISD # 1 Tulsa Public Schools

SCHOOL DISTRICT

3027 South New Haven Avenue; Tulsa, OK 74114

SCHOOL DISTRICT MAILING ADDRESS

McLain Seventh Grade Academy

NAME OF SITE

*456 Priority*

*Tasha Doolay*

PRINCIPAL SIGNATURE\*

*7-1-15*

DATE

PRINCIPAL SIGNATURE\*

DATE

PRINCIPAL SIGNATURE\*

DATE

Dr. Deborah Gist

SUPERINTENDENT NAME (PLEASE PRINT)

*gistde@tulsaschools.org*

SUPERINTENDENT E-MAIL ADDRESS

*Dr. Deborah Gist*

SUPERINTENDENT SIGNATURE\*

*7-24-2015*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on *July 28*, 2015

*Dr. Lana Turner-Addison*

BOARD PRESIDENT SIGNATURE\*

NOTARY SEAL →

*Carolyn S. Holski*

NOTARY

*7-28-15*

DATE

COMMISSION EXPIRES ON DATE

Statute/Oklahoma Administrative Code to be Waived:

(specify statute or OAC (deregulation) number: (see instructions))

\*Original signatures are required. The attached questionnaire must be answered to process.\*\*

### SDE USE ONLY

PROJECT YEARS

\_\_\_\_\_ of \_\_\_\_\_

ENROLLMENT

\_\_\_\_\_ High School

\_\_\_\_\_ Jr./Middle High

\_\_\_\_\_ Elementary

\_\_\_\_\_ District Total

DATE RECEIVED

70 O.S. \_\_\_\_\_

OAC \_\_\_\_\_

# SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

## for 20 15 – 20 16 school year

Tulsa

ISD # 1 Tulsa Public Schools

COUNTY

SCHOOL DISTRICT

3027 South New Haven Avenue; Tulsa, OK 74114

SCHOOL DISTRICT MAILING ADDRESS

*Priority 337* *175* *Priority 315*  
 Anderson Elementary, Dual Language Academy, Jackson Elementary

NAME OF SITE

*Tony L. Taylor*  
 PRINCIPAL SIGNATURE\*

*6/26/15*  
 DATE

*Silvane Vannoy*  
 PRINCIPAL SIGNATURE\*

*7/06/15*  
 DATE

*Elmer [Signature]*  
 PRINCIPAL SIGNATURE\*

*6/29/15*  
 DATE

Dr. Deborah Gist

SUPERINTENDENT NAME (PLEASE PRINT)

*gistde@tulsaschools.org*  
 SUPERINTENDENT E-MAIL ADDRESS

*[Signature]*  
 SUPERINTENDENT SIGNATURE\*

*7-22-2015*  
 DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on *July 28*, 20*15*

*[Signature]*  
 BOARD PRESIDENT SIGNATURE\* *Dr. Lane Turner-Addison*

NOTARY SEAL →

*Carelyn S. [Signature]*  
 NOTARY



*7-28-15*  
 DATE

COMMISSION EXPIRATION DATE

Statute/Oklahoma Administrative Code to be Waived:  
 (specify statute or OAC (deregulation) number: (see instructions))

\*Original signatures are required. The attached questionnaire must be answered to process.\*\*

### SDE USE ONLY

PROJECT YEARS  
 \_\_\_\_\_ of \_\_\_\_\_

#### ENROLLMENT

- \_\_\_\_\_ High School
- \_\_\_\_\_ Jr./Middle High
- \_\_\_\_\_ Elementary
- \_\_\_\_\_ District Total

DATE RECEIVED

70 O.S. \_\_\_\_\_

OAC \_\_\_\_\_



