

JOY HOFMEISTER

STATE SUPERINTENDENT OF PUBLIC INSTRUCTION OKLAHOMA STATE DEPARTMENT OF EDUCATION

MEMORANDUM

TO: The Honorable Members of the State Board of Education

FROM: Joy Hofmeister

DATE: September 24, 2015

SUBJECT: Statutory Waiver Concerning Adjunct Teachers

The following schools are requesting a waiver of 70. O.S. § 6-122.3, which limits the amount of time adjunct teachers may teach to ninety (90) clock hours per semester. Approval is recommended.

District	County	Alternative Means	Duration of Waiver (Years)
Anadarko David Sullivan	Caddo* (3)	Adjunct teacher will teach two hours per day of Native American Languages	o 1
Colcord Sally Haggard	Delaware* (2)	Adjunct teacher will teach two hours per day of Speech/Drama/Debate	o 1
Elmore City-Parnell Miriam Smith	Garvin* (4)	Adjunct teacher will teach two hours per day of Spanish	o 1
Glover Daniel Ridenhour	McCurtain* (2)	Adjunct teacher will teach two hours a day of Reading	0 1
Macomb Shannon Browning	Pottawatomie* (5)	Adjunct teacher will teach two hours per day of Computer Education	3



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Mill Creek Josh Aduddell William Kiddle	Johnston* (2)	Two Adjunct teachers will teach two hours per day of Physical Education and Health	2
Roff	Pontotoc* (4)	Adjunct teacher will teach three hours a day of Science classes	2

* The number in the County category represents the Congressional District. See the attached map.

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Attachments

§70-6-122.3. Alternative Placement teaching certificate - Alternative Placement programs - Adjunct teachers.

A. The State Board of Education shall grant an Alternative Placement teaching certificate to a person who makes application to the State Board and meets all of the following criteria:

1. Holds at least a baccalaureate degree from an institution whose accreditation is recognized by the Oklahoma State Regents for Higher Education;

2. Has completed a major in a field that corresponds to an area of specialization for an Elementary-Secondary Certificate, a Secondary Certificate or a vocational-technical certificate;

3. Declares the intention to earn Standard Certification by means of the Alternative Placement Program in not more than three (3) years. For the purposes of the Alternative Placement Program only, the State Board of Education shall determine the subject matter of professional education component pursuant to this section, and the requirements for the Professional Education component required for Standard Certification shall be as follows:

a. baccalaureate degree, and eighteen (18) semester hours or two hundred seventy (270) clock hours, or

b. postbaccalaureate degrees, teaching experience or subject matter work experience, or a combination of the three shall reduce the eighteen (18) semester hours or two hundred seventy (270) clock hours by the following:

Degree or Experience Hour Reduction Master's Degree 6 semester hours or 90 clock hours Doctorate Degree 6 semester hours or 90 clock hours 1 year teaching or subject matter work experience 3 semester hours or 45 clock hours 2 years teaching or subject matter work experience 6 semester hours or 90 clock hours 3 years teaching or subject matter work experience 9 semester hours or 135 clock hours 4 years teaching or subject matter work experience 12 semester hours or

the State Board of Education shall establish a core minimum of six (6) semester hours or ninety (90) clock hours. Under no circumstance shall the number of hours be reduced to less than six (6) semester hours or ninety (90) clock hours.

d. for purposes of this section:

(1) "teaching experience" shall mean full-time employment as a teacher in a public school, private school licensed or accredited by the State Board of Education, or institution of higher education,

"subject matter work experience" shall mean work experience in a field that corresponds to the area of specialization for Elementary-Secondary Certificate, Secondary Certificate or vocational-technical certificate.

Such requirements shall exclude all student teaching requirements pursuant to the provisions of subsection E of this section;

4. Has passed the general education and subject area portions of the competency examination required in Section 6-187 of this title in the area of specialization for which certification is sought; and

- 5. Either presents a document from an accredited public school district in this state offering employment in the area of specialization for which certification is sought on condition that the person enroll in an Alternative Placement Program approved by the State Board of Education or declares the intention to seek employment as a teacher at an accredited public school district in this state. The certificate granted pursuant to this subsection shall be considered a "valid certificate of qualification" for the purposes of Sections 6-107 and 6-108 of this title, and the holder of such certificate shall be considered a resident teacher for the purposes of Section 6-195 of this title.
- B. Said certificate shall be renewed for not more than a maximum of three (3) years upon presentation of a document from an accredited public school district in this state offering renewed employment in the same area of specialization and a document from a teacher education institution verifying satisfactory progress in the appropriate Alternative Placement Program.

C. Persons enrolled in an Alternative Placement Program shall:

1. Have never been denied admittance to a teacher education program approved by the Oklahoma State Regents for Higher Education, the North Central Association of Colleges and Schools and by the Oklahoma State Board of Education to offer teacher education programs, nor have enrolled in and subsequently failed courses necessary to successfully meet the minimum requirements of such program, except those persons who hold a certificate;

2. Have on file with the director of teacher education at an Oklahoma institution of higher

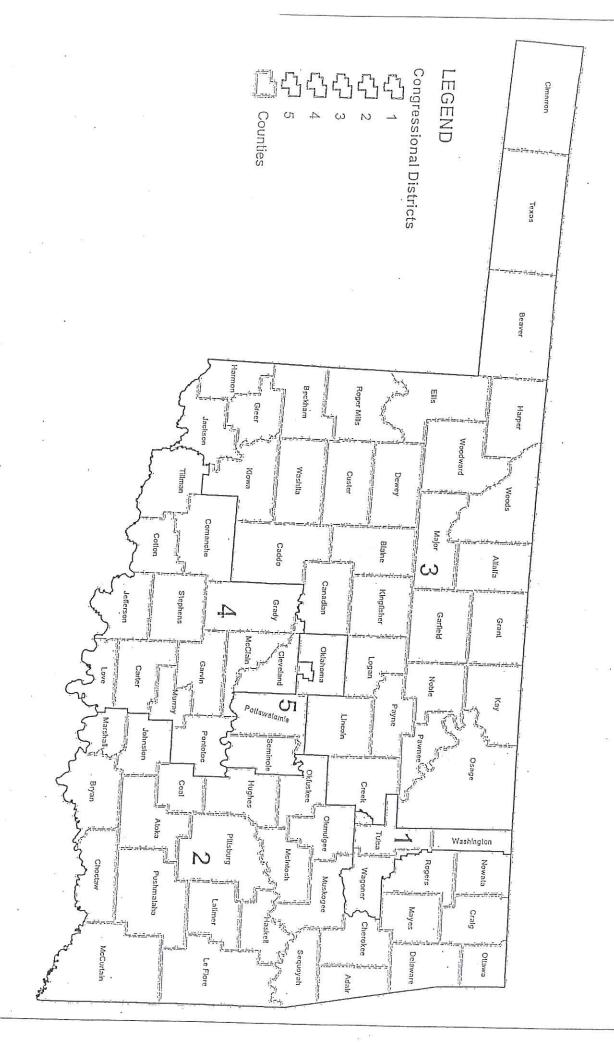
education a plan for meeting standard certification requirements within three (3) years;

3. Participate in the Entry-year Assistance Program, Section 6-152 et seq. of this title and have the same duties and responsibilities as other Entry-year Assistance Program participants, except those persons who hold a certificate; and

- 4. Document at least two (2) years of work experience which is related to the subject area of specialization if the person has only a baccalaureate degree with no postbaccalaureate work in a related area.
- D. The State Board of Education may grant an exception to the requirements for licensure and certification and, upon demonstration by an individual of specific competency in the subject area of specialization, may grant a license or certificate to the individual. The State Board may establish other requirements necessary to grant such exceptions.
- E. Student teaching and a prestudent teaching field experience shall not be required of Alternative Placement Program participants for Standard Certification.
- F. The State Board of Education shall promulgate rules authorizing adjunct teachers who shall be persons with distinguished qualifications in their field. Adjunct teachers shall not be required to meet standard certification. Any such adjunct teachers shall be limited to ninety (90) clock hours per semester.
- G. Each teacher education institution shall provide the Office of Accountability an annual report of information specified by the Office of Accountability regarding participation in the Alternative Placement Program.
- H. The State Board of Education shall not accredit, renew the accreditation of, or otherwise approve any teacher education program of any institution of higher education in this state that has not made a commitment to, and begun implementation of, Alternative Placement Programs in at least four areas of specialization, including mathematics, science and a foreign language, whereby individuals who meet the criteria of subsections A and C of this section are:

1. Admitted without further qualification; and

- 2. Offered the opportunity to complete the Standard Certification course requirements set forth in subsection A of this section during the summer preceding and the summer following the first year of teaching under the Alternative Placement Program. Provided, however, any person seeking Alternative Placement shall be permitted to take necessary courses during regular semesters if offered.
- I. The criteria specified in subsection H of this section can be met through a cooperative arrangement entered into by two or more institutions of higher education.



Oklahoma House of Representatives, GIS Office

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100 Miles

Deregulation/Statutory	Waiver A	nnlica	tion Worksh	neet
** SCHOOL YEAR 2015-2016**** Superintendent: Cindy Hackney District Name: Anadarko School Name: High School RAO: Kim Hale O.A.C. Number: Statute Number: 70 OS 122.3 Adjunct	Cou Dat Dat	inty: te Rec	Cac eived: application	ldo
Correct Form: Correct Standard Stated: Principal's Signature: Superintendent's Signature: Board President's Signature: Notary with Seal: Equivalency/Letter of Explanation: Bell Schedule: School Calendar: Contract(Library/Counseling):	Yes X X X X X X X On school	No	NA	Need
Enrollment High School Middle/Junior High School Elementary School Total Enrollment 493 431 1005 1005				
Description: Requesting waiver for an a teacher to teach two hours	adjunct s per day	Appr	rd Month:	Lynn Jones
Project Year: 1 of 1 School Year: 2015-2016 Timeline: Super CC: Princi	intende ipal	A _l	obreviated D oproved via o otification	will attend will attend

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION for 20 15 - 20 16 school year

Caddo	Anadarko School Di	strict I-20
COUNTY	SCHOOL DISTRICT	SINCE DEL CHARACTER CONTRACTOR DE LA CON
1400 S. Mission		
SCHOOL DISTRICT MAILING ADDRESS		
Anadarko High School		
NAME OF SITE	\	8/7/15
PRINCIPAL SIGNATURE*		DATE
PRINCIPAL SIGNATURE*		DATE
PRINCIPAL SIGNATURE*		PACCREDITATION
Cindy Hackney		AUG 2 1 2015
SUPERINTENDENT NAME (PLEASE PRINT)		
Chackney Qapsusupentendent email adopteds	arriors.com	STATE DEPT. OF EDUCATION 8 -1/1 -/ <
SUPERINTENDENT SIGNATURE*		DATE
	lation application was approved by our g on S-10, 20,15	PROJECT YEARS Of
NOTARY SEAL ->	BIE LOVELLE	ENROLLMENT 493 High School
Jebbie Louell	EXP 01 21 10 = 8/10/2015	<u>431</u> Jr./Middle High
NOTARY 1/21/2010	OF OKA DATE	1,929 District Total
Statute/Oklahoma Administrative Co	ode to be Waived:	DATE RECEIVED
(specify statute or OAC (deregulation)	number: (see instructions)	70 O.S.
70 O.S. & 1-122.3 A		0.10
*Original signatures are required. The attached	questionnaire must be answered to process.**	OAC
		adjunct Teachers

Deregulation/Statutory Waiver Application Worksheet

** SCHOOL YEAR 2015-2016*** Superintendent: Bud Simmons County: Delaware **District Name:** Colcord Date Received: Aug. 24, 2015 **School Name:** High RAO: Mike Teel Date of Application: O.A.C. Number: Statute Number: 70 OS 122.3 Adjunct Teacher Yes No NA Need Correct Form: X **Correct Standard Stated:** X Principal's Signature: X Superintendent's Signature: X **Board President's Signature:** X Notary with Seal: X Equivalency/Letter of Explanation: X **Bell Schedule:** School Calendar: Contract(Library/Counseling): Focus, Priority, Targeted Intervention school- HS Targeted Intervention **Enrollment High School** 227 Middle/Junior High School **Elementary School** 398 **Total Enrollment** 625 Description: Requesting waiver for adjunct **Board Month:** Sept. 2015 teacher to teach two hours per day Approval Lynn Jones Abbreviated Day/COOP Approved via e-mail(attached) Project Year: 1 of 1 School Year: 2015-2016 Notification Timeline: Superintendent will attend **Principal** CC: will attend

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION for 20 15 - 20 16 school year

Delaware	Colcord	
COUNTY	SCHOOL DISTRICT	
433 S Larmon Colcord	, OK 74338	
SCHOOL DISTRICT MAILING ADDRESS		
Colcord High School		
NAME OF SITE	0	
Sern Swo	and -	8-19-15
PRINCIPAL SIGNATURE		DATE
PRINCIPAL SIGNATURE*		DATE
PRINCIPAL SIGNATURE*		DATE RECEIVED
Bud Simmons		ACCREDITATION
SUPERINTENDENT NAME (PLEASE PRIN	NT)	AUG 2 4 2015
bsimmons & col SUPERINTENDENT E-MAIL ADDRESS	cordschools. Com	STATE DEPT. OF EDUCATION
Bud G Son	Lon	8-19-15
SUPERINTENDENT SIGNATURE*		DATE
I hereby certify that this waiver/der local beard of education at the me	regulation application was approved by our	SDE USE ONLY
	H49431 (5,20 (5	PROJECT YEARS
Lavid Ta	moly	
BOARD PRESIDENT SIGNATURE*		ENROLLMENT
NOTARY SEAL ->	OFFICIAL SEAL SHARRON SIMMONS	221 High School
Abarron &	DELAWARE COUNTY OF LCOMMUNO 12007130 EXP. 07.3/ 9.11-	Jr./Middle High
NOTARY	DATE	Elementary
07-30-2616 COMMISSION EXPIRATION DATE		625 District Total
Statute/Oklahoma Administrative	a Cada ta ha Waiyadi	DATE RECEIVED
(specify statute or OAC (deregulati	ion) number: (see instructions)	70 O.S.
Adjunct Teachers - *Original signatures are required. The atta	70 O.S. § 1-122.3 ched questionnaire must be answered to process.**	
5- Jargeted clut		adjunct Teacher

Deregulation/Statutor ** SCHOOL YEAR 2015-2016****	y Waiver App	olication Wo	orksheet
Superintendent: Donny Darrow	Coun		Garvin
District Name: Elmore City-Parnel High School	l Date	Received:	Aug. 24, 2015
RAO: Ryan Pieper	Date	of Applica	tion:
O.A.C. Number:			
Statute Number: 70 OS 122.3 Adjund	et Teacher		
	Yes N	o NA	Need
Correct Form:	_X		<u> </u>
Correct Standard Stated:	X		
Principal's Signature:	X		
Superintendent's Signature:	<u>x</u>		
Board President's Signature: Notary with Seal:	<u>X</u>		
Equivalency/Letter of Explanation:	x		
Bell Schedule:			
School Calendar:			
Contract(Library/Counseling):			
3,000,000			
Focus, Priority, Targeted Intervent	ion school		
Enrollment			
High School 134			
Middle/Junior High School 77			
Elementary School 291			
Total Enrollment 502			
<u>Description</u> : Requesting waiver to allo adjunct teacher to teach t	w wo hours	Board Mor	<u>nth</u> : Sept. 2015
per day		- (/
			\mathcal{L}_{i}
		Approval:	Alma Jones
			Lynn Jones
		Abbreviat	ed Day/COOP
			via e-mail(attached)□
Project Year: 1 of 1		Notificat	ion
School Year: 2015-2016 Timeline: Supe	rintendent		will attend
CC: Princ			will attend
	590		The second secon

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION for 20 15 _ - 20 16 _ school year

Garvin	Elmore	City-	Pern	ell
COUNTY	SCHOOL DIS	STRICT		
100 N. Muse St.	Elmore	City,	OK	73433
SCHOOL DISTRICT MAILING ADDRESS				
Elmore City-Pernell High School	01			
NAME OF SITE				
Jackin Co Solle				8.19-15
PRINCIPAL SYMATURE*				DATE
V				
PRINCIPAL SIGNATURE*				DATE
				DATE
PRINCIPAL SIGNATURE*				
Donny Darrow				RECEIVED ACCREDITATION
SUPERINTENDENT NAME (PLEASE PRINT)				AUG 2 4 2015
ddarrow@ecphs.kas.ok.us				ATTERDED OF FRUNKTION
SUPERINTENDENT E-MAIL ADDRESS				STATE DEPT. OF EDUCATION
Donny Danow				8/19/15
SUPERINTENDENT SYNATURE*			/	DATE
•				
I hereby certify that this waiver/deregulation application	,		r	SDE USE ONLY
local poord of education at the meeting on $\frac{1}{3}$	- manning	20 />		PROJECT YEARS
	HIMBBIE W	OONE		/_of _/_
BOARD PRESIDENT SIGNATURE*	ON PRY PU	OZ.		ENROLLMENT
	No. 130044	56		ail
NOTARY SEAL →	(EXP. 5/09/2 (N. IN AND		WW.	High School
	FOR			Jr./Middle High
Dosens Will	MINOF OK	THUM	-	291 Elementary
NOTARY	DATEITIIIII			502 District Total
5/09/2017 COMMISSION EXPIRATION DATE			_	District Total
COMMISSION EXPIRATION DATE			ı	
Statute/Oklahoma Administrative Code to be Waive	d:		I	DATE RECEIVED
(specify statute or OAC (deregulation) number: (see ins			- 1	70 O.S.
*Original signatures are required. The attached questionnaire must	be answered to	process.**		OAC
				adjunct Teacher
			-	0

** 0011001 17	Deregulation/Statuto	ory Waive	r Appli	ication Wo	orksheet	
Superintende	EAR 2015-2016**** ent: David Hawkins		County: Date Received:		McCur	
District Nam School Name		D	ate K	eceiveu:	Aug. 17	, 2015
RAO:	Kelly Bowen	D	ate o	f Applica	tion:	
O.A.C. Numb				P-F		
Statute Num	ber: 70 OS 122.3 Adju	nct Teach	er			
		Yes	No	NA		Need
Correct Form	1:	X	110			
Correct Stand		- X	Section 1		-	
Principal's Si	gnature:	X			* -	
	ent's Signature:	X	-		-	
	ent's Signature:	X				
Notary with S	the state of the s	X				
	Letter of Explanation	n: x				
Bell Schedule						
School Calen	dar:					
Contract(Lib	rary/Counseling):			N -		
Focus, Priori	ty, Targeted Interve	ntion sch	ool-	Priority		
	Enrollment					
High School	0					
	or High School 0					
Elementary S	School 81					
Total Enrolln	nent 81					
Description:	Requesting waiver to al adjunct teacher to teach	llow n two hou		oard Moi	nth:	Sept. 2015
	per day				11	
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3440 212						Lynn Jones
			_	Abbreviat Approved		/COOP nail(attached)□
Duoingt Was-	1 of 1					
Project Year: School Year:				Notificat	tion	
Timeline:	Sur	erinten	dent	TIOUTICAL	LAUA A	will attend
CC:		ncipal				will attend

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION for 20 15 _ _ 20 16 _ _ school year

McCurtain	Glover
COUNTY	SCHOOL DISTRICT
701 Lavender Road Broken Bow OK 74728	
SCHOOL DISTRICT MAILING ADDRESS	
Glover Elementary	
PRINCIPAL SIGNATURE*	7/28/15 DATE
PRINCIPAL SIGNATURE*	DATE
PRINCIPAL SIGNATURE*	DATE
David Hawkins	RECEIVED ACCREDITATION
SUPERINTENDENT NAME (PLEASE PRINT)	AUG 1 7 2015
dhawkins @ weisd.org superigtendent e-mail address	STATE DEPT. OF EDUCATION
David Hawkins	7/28/15
SUPERINTENDENT SIGNATURE*	DATE
I hereby certify that this waiver/deregulation application	was approved by our SDE USE ONLY
local board of education at the meeting on July	
Jamie Stella 1014	
BOAND PRESIDENT SIGNATURE*	ENROLLMENT
NOTARY SEAL	<u> </u>
NOTARY SEAL STATE OF	28-15 <u>U</u> Jr./Middle High
NOTARY	DATE Elementary
Hugust 31, 2017 COMMISSION EXPIRATION DATE	District Total
Statute/Oklahoma Administrative Code to be Waived	
(specify statute or OAC (deregulation) number: (see instr	ructions) 70 O.S
*Original signatures are required. The attached questionnaire must b	ne answered to process.** OAC AMMOL

Deregulation/Statutory ** SCHOOL YEAR 2015-2016****	Waiver A	Application	n Worl	ksheet
Superintendent: Matthew Riggs	Co	unty:	I	Pottawatomie
District Name: Macomb	Da	te Receiv	ved: A	Aug. 17, 2015
School Name: High RAO: Linda Proctor Moore	, Do	te of App	liooti	on.
O.A.C. Number:	Da	te of App	mean	oii:
Statute Number: 70 OS 122.3 Adjunct	Teacher			
	Yes	No N	ΙA	Need
Correct Form:	X	NO IV	(A)	Need
Correct Standard Stated:	- X			
Principal's Signature:	X			
Superintendent's Signature:	X			
Board President's Signature:	X			
Notary with Seal:	X			
Equivalency/Letter of Explanation:	X			
Bell Schedule:				<u> </u>
School Calendar:				
Contract(Library/Counseling):				
Focus, Priority, Targeted Interventi	on scho	ol-		
Enrollment				
High School 114				
Middle/Junior High School o				
Elementary School 208				
Total Enrollment 322				
<u>Description</u> : Requesting waiver to allow adjunct teacher to teach tw	v vo hours	Board	Mont	<u>h</u> : Sept. 2015
_ per day			1	/
			. >	Ky Os
		Approv	<u>'al: </u>	som forces
				Lynn(Jones
		Abbre	eviated	l Day/COOP
				ia e-mail(attached)□
as a second contract and said		11		
Project Year: 3 of 3		NT-1	Gest	
School Year: 2015-2016 Timeline: Super	intende	nt <u>Nou</u>	ficatio	will attend
CC: Super				will attend
		******	TOS SON THE	2027 11112011

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

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION FOR 20_15 - 20_16 SCHOOL YEAR

County Name Pottawatomie	
Name of School District: Macomb Public Schools	RECEIVED ACCREDITATION
District Office Mailing Address 36591 State Highway 59B, Macomb, Ok	
Name of Site(s): Macomb High School (705)	STATE DEPT. OF EDUCATION
Gott Fragier	Date <u>1-22-15</u> Date <u>1-22-15</u> Date
Superintendent's Name Printed Matthew Riggs	
Signature of Superintendent:* Date	SDE USE ONLY
I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on July 22, 20_5	PROJECT YEARS 3 of 3
Signature of Board President*	ENROLLMENT
DIANE F MYERS NOTARY PUBLIC - STATE OF OKLAHOMA COMMISSION # 02013541 My Commission Expires Sept. 10, 2018 Bonded Through RLI Insurance Company	High School/
Notary: Drane Drugers	District Total 322
Date: $\frac{7/22/15}{15}$ My Commission Expires: $\frac{9/10/18}{15}$	Date Received
Statute/Oklahoma Administrative Code to be Waived:	
(specify statute or OAC (deregulation) number: (see instructions)	70 O.S.
Adjunct Teacher 70 O.S. § 1-122.3	OAC

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

Adjunct leacher

Deregulation/Statutory Waiver Application Worksheet ** SCHOOL YEAR 2015-2016* Superintendent: Lorinda Chancellor County: Johnston **District Name:** Mill Creek Date Received: Aug. 21, 2015 School Name: Elem. and High School RAO: Date of Application: O.A.C. Number: Statute Number: 70 OS 122.3 Adjunct Teacher Yes No NA Need **Correct Form:** X **Correct Standard Stated:** X Principal's Signature: X Superintendent's Signature: X **Board President's Signature:** X Notary with Seal: X Equivalency/Letter of Explanation: X **Bell Schedule:** School Calendar: Contract(Library/Counseling): Focus, Priority, Targeted Intervention school- ES Focue **Enrollment High School** 48 Middle/Junior High School 0 **Elementary School** 96 **Total Enrollment** 144 **Description:** Requesting waiver to allow two **Board Month:** Sept. 2015 teachers to teach two hours per day as an adjunct Abbreviated Day/COOP Approved via e-mail(attached) Project Year: 2 of 2 School Year: 2015-2016 Notification Timeline: Superintendent will attend **Principal** CC: will attend

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION for 20 15 ___ - 20 16 ___ school year

Johnston	Mill Creek
COUNTY	SCHOOL DISTRICT
P.O. Box 118 Mill Creek, OK 74856	
SCHOOL DISTRICT MAILING ADDRESS	/
Mill Creek Elementary and High School	Combined with other
NAME OF SITE	waver
Inima Chancella	08/17/2015
PRINCIPAL SIGNATURE*	DATE
Korima Chancelles	08/17/2015
PRINCIPAL SIGNATURE*	DATE
doring Chancelly	08/17/2015
PRINCIPAL SIGNATURE*	DATE
Lorinda Chancellor	RECEIVED ACCREDITATION
SUPERINTENDENT NAME (PLEASE PRINT)	AUO 0 1 001F
SUPERINTENDENT E-MAIL ADDRESS	<i>(</i> C,
SUPERINTENDENT E-IMAIL ADDRESS	STATE DEPT. OF EDUCATION
	08/17/2015
SUPERINTENDENT SIGNATURE*	DATE
I hereby certify that this waiver/deregulation application local board of education at the meeting on <u>August</u>	
Kathy Castleberry	ENDOLLMENT
NOTARY SEAL -> RHONDA ADU Johnson Co Motary Public in	unty 9° High School
State of Oklal Commo 07009088	homa (/ LAXIII LIII
NOTARY CALC TO CALCALET	DATE STITE TO SEIGHT SE
09/19/15	<u>卢</u> District Total
COMMISSION EXPIRATION DATE	DATE DECEMEN
Statute/Oklahoma Administrative Code to be Wa	
(specify statute or OAC (deregulation) number: (see	70 O.S
*Original signatures are required. The attached questionnaire	must be answered to process.** OAC GAMMAT Hachw

Deregulation/Statutory Waiver Application Worksheet

** SCHOOL YEAR 2015-2016* Superintendent: Christopher Morgan County: Pontotoc District Name: Roff Date Received: Aug. 17, 2015 **School Name:** High Rvan Pieper RAO: Date of Application: O.A.C. Number: Statute Number: 70 OS 122.3 Adjunct Teacher Yes No NA Need **Correct Form:** X **Correct Standard Stated:** X Principal's Signature: X Superintendent's Signature: X **Board President's Signature:** X **Notary with Seal:** X Equivalency/Letter of Explanation: **Bell Schedule:** School Calendar: Contract(Library/Counseling): Focus, Priority, Targeted Intervention school-**Enrollment High School** 100 Middle/Junior High School o **Elementary School** 264 **Total Enrollment** 364 **Description:** Requesting waiver to allow **Board Month:** Sept. 2015 adjunct teacher to teach three hours per day Abbreviated Day/COOP Approved via e-mail(attached)□ Project Year: 2 of 2 School Year: 2015-2016 Notification Superintendent Timeline: will attend Principal CC: will attend

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION for 20 15 _ - 20 16 _ school year

Pontotoc - 62	Roff - I-037	
COUNTY	SCHOOL DISTRICT	
P.O. Box 157, Roff, OK 74865		
SCHOOL DISTRICT MAILING ADDRESS		
Roff High School		
NAME OF SITE		
Ed Singa		8-13-15
PRINCIPAL SIGNATURE*		DATE
PRINCIPAL SIGNATURE*		DATE
PRINCIPAL SIGNATURE*		DATE RECEIVED ACCREDITATION
Christopher S. Morgan		AUG 1 7 2015
SUPERINTENDENT NAME (PLEASE PRINT) SMORANCE CORT. K. 2. OK. SUPERINTENDENT E-MAIL ADDRESS	uS	STATE DEPT. OF EDUCATION
SUPERIOR ENDENT SIGNATURE*		8-/3-/5 ⁻ DATE
NOTARY SEAL -		SDE USE ONLY PROJECT YEARS — 2 of 2 ENROLLMENT //// High School _ O Jr./Middle High 264 Elementary 364 District Total
itatute/Oklahoma Administrative Coo specify statute or OAC (deregulation) n		DATE RECEIVED 70 O.S.
Original signatures are required. The attached c	questionnaire must be answered to process.**	adjunct