



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: October 22, 2020
SUBJECT: Deregulation for Library Media Specialist Certificate Exemption

The following school is requesting exemption from library media certification requirements pursuant to 70 O.S. § 3-126 for the 2020-2021 school year. A certified teacher will be used as the librarian while pursuing library media certification. Approval is recommended.

County	District	Waiver Years	Student Served
Murray	Sulphur	1 of 1	1,558
Oklahoma	Oklahoma City (Rogers ES)	5 of 5	42,513
Rogers	Oologah-Talala	2 of 2	1,881

3 Years

Muskogee	Oklahoma School for the Blind	1 of 1	80
Tulsa	Tulsa (All Sites with Attachment)	4 of 4	38,509

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

ab
Attachments

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.

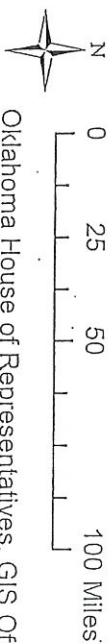
C. Each educational improvement plan shall include a list of the specific educational-related statutory requirements and State Board of Education rules the school district is requesting an exemption from and why each exemption is necessary to success of the plan. The school district shall not be granted 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)

LEGEND

Congressional Districts

1
2
3
4
5

Counties



SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 21 school year

Murray

Sulphur Public Schools

COUNTY

SCHOOL DISTRICT

1021 W 9th Street

Sulphur

73086

SCHOOL DISTRICT MAILING ADDRESS

CITY

ZIP CODE

Sulphur Elementary and Sulphur Intermediate Schools

NAME OF SITE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

Matt Holder

SUPERINTENDENT NAME (PLEASE PRINT)

matt.holder@sulphur12.org

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

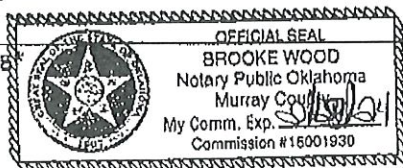
I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on September, 2020

BOARD PRESIDENT SIGNATURE

NOTARY SEAL →

NOTARY

COMMISSION EXPIRATION DATE



DATE

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

OAC

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

**THE WAIVER/DEREGULATION
IS REQUESTED FOR:**

☒ One Year Only
☐ Three Years*

*Please see instruction page for additional requirements for a three year request

SDE USE ONLY

PROJECT YEARS
1 of 1

ENROLLMENT

☐ High School
☐ Jr./Middle High
☐ Elementary

1558 District Total

9-23-2020
DATE RECEIVED

70 O.S. 3-124

OAC

Library Media
NAME OF WALKER
Specialist

A. Reason for the waiver/deregulation request (be specific).

Library media specialist resigned in July.

B. List alternate strategies/plans which the district/site proposes, and how this plan will best serve the students of your district, i.e., a description of the educational benefits to the students and learning achievement.

We have found a certified teacher within the District that is wanting the position and willing to pursue her certification through the appropriate avenues. Students will benefit by having a certified teacher in our Library.

C. Educational impact to the district: Results of the Statutory Waiver/Deregulation, i.e., effect on student performance levels, impact of plan on other sites in the district.

We expect there to be no negative impact on student performance or impact any other sites.

D. Timeline: Please submit class schedule, calendars, assessment forms and other attachments as necessary, or described in instructions.

A waiver/deregulation can be granted for up to 3 years. (Please see instructions for additional requirements)

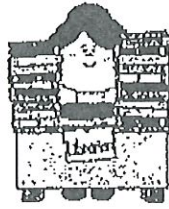
E. Any financial impact to the District (positive or negative) for the proposed waiver/deregulation.

There are no positive or negative financial impact to the District.

F. Describe method of assessment or evaluation of effectiveness of the plan.

Sulphur Public Schools uses the Tulsa TLE mode to evaluate certified employees. There will be numerous walk throughs and formal evaluations with informal and formal feedback.

SES & SIS Librarian Schedule



7:45-8:10	SES	Prepping for the day
8:10-9:10	SES	1 st Grade
9:10-10:10	SES	Kindergarten
10:10-11:10	SES	2 nd grade
11:10-12:10	SES	Pre K
12:10-12:40		Lunch
12:40-3:00	SIS	3 rd -5 th grade

July 6, 2020

To whom it may concern,

I will be moving to the Sulphur Elementary and Intermediate School Librarian position for the 2020-2021 school year. I will begin working on my master's degree in library media from East Central University August 2020.

Sincerely,

M. Goodman

Mallory Goodman



School of Graduate Studies
1100 E. 14th Street, PMB H-7 • Ada, OK 74820-6999
(580) 559-5368 • (580) 559-5159 Fax • gradschool@ecok.edu
Dr. Adrianna Lancaster, Dean, School of Graduate Studies

July 9, 2020

To Whom It May Concern,

RE: Mallory Jo Cowan

Mallory Jo Cowan (182668) has been admitted to the School of Graduate Studies to start the Master of Education in Library Media at East Central University. She will begin the program Fall 2020 and is enrolled for 3 graduate credit hours.

The Master of Education in Library Media is a 32-hour plan of study designed for graduate students planning to become a School Library Media Specialist in grades PK-12 in public or private educational settings.

Let us know if you have any questions.

Sincerely,

Dr. Adrianna Lancaster
Dean, School of Graduate Studies

al/aeg

Regular Meeting
Monday, September 14, 2020 5:15 PM

Board Conference Room, 1021 west 9th
street, Sulphur, OK 73086

Agenda

Notice is hereby given that a Regular meeting of the Board of Education of Independent School District I-001, Murray County, Oklahoma will be held on Monday, September 14, 2020, beginning at 5:15 p.m. in the Board Conference Room, 1021 west 9th street, Sulphur, OK 73086
Call to order

Roll Call

Consent Agenda

1. Approve the minutes of the regular board meeting on August 3, 2020
2. Approve the monthly financial reports of activity funds

Action Agenda Items

1. Discuss the financial reports prepared by Mr. David Harp, school treasurer
2. Superintendents report
3. Discuss and possible action on encumbrances and change orders
4. Athletic Director's report
5. Principal reports
6. Discuss and possible action on the 2020-2021 Budget based on the Estimate of Needs to be approved by the County Excise Board
7. Discuss and possible action on the statutory waiver, Malloreay Goodman (Elementary Library)
8. Discuss and possible action to choose ACT as Sulphur Public Schools locally selected, nationally recognized assessment for the College and Career Readiness Assessment
9. Discuss and possible action on a SMS FCCLA fundraiser
10. Discuss and possible action on a SES fundraiser
11. Discuss and possible action on adding Ruby Richburg, Sara Ring, Karen Magruder and Sarah Farrell to the substitute list
12. Discuss and possible action on Sulphur Public Schools distance learning plan
13. Discuss and possible action on SHS FFA traveling out of state October 14-17 to Kansas City, MO and Kansas City, KS

14. Discuss and possible action on the Oklahoma Department of Career and Technology Education for Secondary Career and Technology Education Programs for school year 2020-2021

15. Discuss and possible action on convening into Executive Session pursuant to [Section 25 O.S. § 307 (B) (1)] for the purpose of accepting the resignation of Kenneth McCracken, the employment of Jessie Wright (MS para), the employment of Maria Moreno (SES para), the employment of Pearla Osornio (MS para) and discuss pending litigation as authorized by [Section 25, O.S. § 307 B (4)], authorizing confidential communications between a public body and its attorney concerning pending claims

16. Acknowledge returning from Executive Session with no action taken in Executive Session

17. Discuss and possible action on accepting the resignation of Kenneth McCracken

18. Discuss and possible action on the employment of Jessie Wright, SMS Para

19. Discuss and possible action on the employment of Maria Moreno, SES Para

20. Discuss and possible action on the employment of Pearla Osornio, SMS Para

21. New Business

Vote to Adjourn

If you desire to attend a meeting of the Board of Education but require accessible facilities, please contact the Superintendent, 1021 West 9th Street, Sulphur, OK 73086. Telephone (580) 622-2061

Date posted:
Time posted:

Posted by:
Place posted: Board of Education Office
1021 West 9th
Sulphur, OK 73086

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020-2021 school year

Oklahoma

COUNTY

Oklahoma City Public Schools I-89

SCHOOL DISTRICT

PO Box 36609

SCHOOL DISTRICT MAILING ADDRESS

Oklahoma City

CITY

73136

ZIP CODE

Rogers ES

NAME OF SITE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

Dr. Sean McDaniel

SUPERINTENDENT NAME (PLEASE PRINT)

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on 9-14, 2020

BOARD PRESIDENT SIGNATURE*

Paula M. Lewis

NOTARY SEAL →

NOTARY

COMMISSION EXPIRATION DATE



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.**

THE WAIVER/DEREGULATION IS REQUESTED FOR:



One Year Only

Three Years*

*Please see instruction page for additional requirements for a three year request

SDE USE ONLY

PROJECT YEARS

5 of 5

ENROLLMENT

High School

Jr./Middle High

Elementary

42513 District Total
RECEIVED SEP 29 2020

DATE RECEIVED

70 O.S. 3-124

OAC

Library Media Spec.
NAME OF WAIVER

A. Reason for the waiver/deregulation request (be specific).

Oklahoma City Public Schools is seeking statutory waiver(s) for exemption to certification for library media specialists due to a lack of certified candidates. The District is committed to meeting the Oklahoma State Standards and the mandates of HB 1017. All school sites have allocations for media assistants and specialists that comply with Accreditation Standard VII. Unfortunately, enough certified candidates do not exist in the Oklahoma City area. The District seeks permission to hire certified classroom teachers and college graduates with library experience/education, to work as library media specialist. These employees serving in library positions without the benefit of library media certification will hereafter be referred to as paralibrarians. Every candidate will be required to be actively working toward library media certification. Paralibrarians will be paired with certified librarians who serve as mentors and consultants.

B. List alternate strategies/plans which the district/site proposes, and how this plan will best serve the students of your district, i.e., a description of the educational benefits to the students and learning achievement.

Oklahoma City Public Schools is seeking fully certified library media specialists (LMS), for vacancies. In cases where a quality LMS is not available, library services to students will be provided by alternative means. We intend for the following plan to help develop our own specialists by hiring quality certified teachers or college graduates with library experience, requiring enrollment in graduate school, and providing support for services through certified library consultants/mentors. The following strategies will be used:

- * Paralibrarians will be hired only in instances when a quality certified LMS cannot be found.
- * Each paralibrarian will be paired with a mentor LMS who will provide support.
- * Paralibrarians will be required to be enrolled in a graduate program actively working toward LMS certification.
- * Meetings and/or training seminars will be provided and required for paralibrarians.
- * Library media activities will be developed at each site to ensure provision of quality services.

C. Educational impact to the district: Results of the Statutory Waiver/Deregulation, i.e., effect on student performance levels, impact of plan on other sites in the district.

- *Each elementary, middle, and high school will be served by a certified LMS and a media assistant or a paralibrarian and a media assistant. Staffing recommendations of the Media Program (OAC 210:35-5-71) based on school enrollment will be followed.
- *Students and staff at all sites will have access to library programs, services, and resources for a minimum of 6 hours each regular school day.
- *Each candidate for the position of paralibrarian will demonstrate progress toward the appropriate degree and/or certification requirements.
- *The district follows the information literacy standards for student learning for all school library media programs as defined by the American Association of School Librarians and the American Library Association as set forth in the 2007 publication Standards for the 21st-Century Learner.
- *Paralibrarians will receive assistance and support on a regular basis through site visits by the director of library media and mentor LMS, communication with the director and mentor LMS, and meetings and/or training seminars.

D. Timeline: Please submit class schedule, calendars, assessment forms and other attachments as necessary, or described in instructions.

A waiver/deregulation can be granted for up to 3 years. (Please see instructions for additional requirements)

*Paralibrarians will be encouraged to enroll in at least three credits per semester, completing certification requirements in a three to four year period.

*Oklahoma City Public Schools request the Statutory Waiver for one year.

E. Any financial impact to the District (positive or negative) for the proposed waiver/deregulation.

N/A

F. Describe method of assessment or evaluation of effectiveness of the plan.

*Principals of schools employing a paralibrarian will complete the district's current teacher evaluation tool in order to collect data regarding the performance of the employee.

*The paralibrarian will complete an evaluation tool designed to assess the effectiveness of the district provided professional development activity.

*Paralibrarians will complete an end-of-the-year report designed to assess the effectiveness of the library media program.

*Mentors will log contact with paralibrarians.

*Human resource records will track graduate courses completed.

** You will be contacted if more information is needed to process this request.

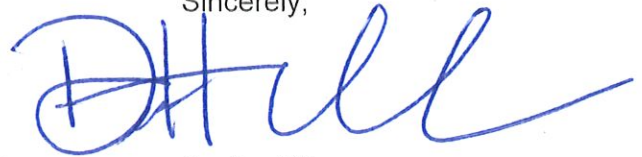
September 1, 2020

Director
Accreditation Standards Division
Oklahoma State Department of Education
2500 North Lincoln Blvd.
Oklahoma City, OK 73105-4599

Dear Director:

This letter is to inform you that I am voluntarily working as a library media specialist for Oklahoma City Public Schools under a statutory waiver granting an exemption of certification for library media specialists. In accordance with my educational plan, I am also voluntarily enrolled in university classes pursuing library media certification. Thank you.

Sincerely,

A handwritten signature in blue ink, appearing to read "Hill", with a large, stylized initial "D" on the left.

Desire Hill
Rogers Elementary

2300 Dulles Station Blvd., Suite 300, Herndon, Virginia 20171
PH (703) 742-4200 FX (703) 742-4239
www.studentclearinghouse.org
© 2020 National Student Clearinghouse. All rights reserved

Policy/Account/Group or Other ID #



September 1, 2020

Accreditation Standards Division
Oklahoma State Department of Education
2500 North Lincoln Blvd.
Oklahoma City, OK 73105-4599

Dear Director:

Attached please find a statutory waiver application of exemption from library media specialist certification requirements for Rogers ES. This statutory waiver seeks permission to hire a certified teacher, currently working towards library media certification, to function as a library media specialist in the school.

Oklahoma City Public Schools Library Media Program has benefited greatly from the previous statutory waivers. This statutory waiver is seeking an exemption of certification for one library media specialist to serve one school for one year.

With your advice and consent, we would appreciate your presenting this statutory waiver application to the State Board of Education for the review and action. Thank you for your assistance and support.

Sincerely,

Dr. Sean McDaniel
Superintendent of Schools

Oklahoma City Public Schools

P.O. Box 36609, Oklahoma City, OK 73136
Phone: 405-587-1000 | web: www.okcps.org

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 – 20 21 school year

Rogers

COUNTY

Oologah-Talala

SCHOOL DISTRICT

P O Box 189 Oologah, OK 74053

SCHOOL DISTRICT MAILING ADDRESS

Oologah Upper Elementary

NAME OF SITE


PRINCIPAL SIGNATURE*

8/7/20
DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

Max Tanner

SUPERINTENDENT NAME (PLEASE PRINT)

max.tanner@oologah.k12.ok.us

SUPERINTENDENT E-MAIL ADDRESS

08/07/2020


SUPERINTENDENT SIGNATURE*

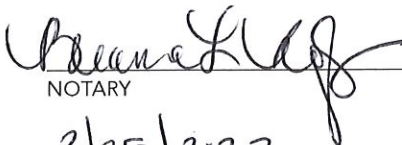
8/7/2020
DATE

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


BOARD PRESIDENT SIGNATURE*

NOTARY SEAL →




NOTARY

8/7/2020
DATE

3/25/2023

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

2 of 2

ENROLLMENT

☐ High School

☐ Jr./Middle High

☒ Elementary

1881 District Total

RECEIVED SEP 18 2020

DATE RECEIVED

70 O.S. 3-124

OAC _____

Library media
Specialist

A. Reason for the waiver/deregulation request (be specific).

Mrs. Fitzgerald has been working under a previous waiver at Tulsa Public Schools. She is very close to finishing her Master's degree in Library Media Science. She will finish this school year and will apply certification. We had no other applicants who were qualified for this job when it was posted.

B. List alternate strategies/plans which the district/site proposes, and how this plan will best serve the students of your district, i.e., a description of the educational benefits to the students and learning achievement.

The position of Library Media Specialist is extremely beneficial to the students in our building. The librarian plays an important part in the development of reading, language, and technology based skills, and she teaches lessons that incorporate both academics and the love of reading. Mrs. Fitzgerald's experience working as both a public school librarian and the librarian of a public library will allow her to provide a well-rounded, highly engaging experience to all our students.

C. Educational impact to the district: Results of the Statutory Waiver/Deregulation, i.e., effect on student performance levels, impact of plan on other sites in the district.

Mrs. Fitzgerald will serve two students in our district, both the Upper Elementary and the Middle School. This extends her influence to over 700 students. For these students, she will be teaching both reading and language arts skills, and demonstrating how to apply those skills in the world of media and technology. Mrs. Fitzgerald will be teaching a portion of the OAS Language Arts skills in her weekly library classes and this will help emphasize and strengthen the teaching students receive in their classes.



UNIVERSITY
OF NORTH TEXAS

TOULOUSE GRADUATE SCHOOL

Student ID #: 11257282
Semester: 2017 Fall
Tuition: Resident
Major (Program/Plan): LISC-MS

August 11, 2017

Susanna Joy Fitzgerald
6250 Rosewood Dr Apt 801
North Richland Hills TX 76180-4960

Dear Ms. Fitzgerald:

Congratulations! You have been admitted to work toward the Master of Science in Library Science program. UNT provides an exciting place to pursue your graduate education and we are committed to your success. At UNT you will find the education and support you need to realize your goals and expand your horizons.

You are now eligible to register during the upcoming enrollment period. Please visit your student portal at my.unt.edu for important information about enrollment dates, registration and class schedules.

I look forward to having you as a graduate student at the University of North Texas and becoming a part of the excitement of discovering real solutions, creating new opportunities and making a difference in the world. Please contact us if you have any questions about making the most of your graduate education.

Sincerely,

Victor Prybutok,
Vice Provost for Graduate Education and
Dean of the Toulouse Graduate School

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 21 school year

MUSKOGEE

COUNTY

OKLAHOMA SCHOOL FOR THE BLIND

SCHOOL DISTRICT

3300 GIBSON STREET

SCHOOL DISTRICT MAILING ADDRESS

MUSKOGEE

CITY

74403

ZIP CODE

OSB ELEMENTARY SCHOOL, OSB MIDDLE SCHOOL, OSB HIGH SCHOOL

NAME OF SITE

Lynn Craig
PRINCIPAL SIGNATURE*

10-8-2020
DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

RITA J. ECHELLE

SUPERINTENDENT NAME (PLEASE PRINT)

rechelle@okdrs.gov

SUPERINTENDENT E-MAIL ADDRESS

Rita Echelle
SUPERINTENDENT SIGNATURE*

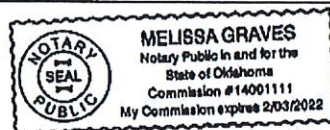
10/8/2020
DATE

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

N/A

BOARD PRESIDENT SIGNATURE*

NOTARY SEAL →



Melissa Graves
NOTARY

10-8-2020
DATE

2/03/2022
COMMISSION EXPIRATION DATE

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

**THE WAIVER/DEREGULATION
IS REQUESTED FOR:**

_____ One Year Only

☒ Three Years*

*Please see instruction page for additional requirements for a three year request

SDE USE ONLY

PROJECT YEARS

1 of 1

ENROLLMENT

☐ High School

☐ Jr./Middle High

☐ Elementary

80 District Total

10-10-2020
DATE RECEIVED

70 O.S. 3-121

OAC _____

Library media
Specialist

A. Reason for the waiver/deregulation request (be specific).

In late July the district's Library Media Specialist resigned. The Library Assistant has worked under the Library Media Specialist for two (2) years and is capable of maintaining the same level of needed services to our students. The Library Assistant is currently taking college coursework to obtain her library/media specialist degree. She is very capable and extremely innovative. We feel that she will maintain a high level of professionalism and provide quality education services to our students.

B. List alternate strategies/plans which the district/site proposes, and how this plan will best serve the students of your district, i.e., a description of the educational benefits to the students and learning achievement.

The Library Assistant has been involved in all aspects of the district's library for two years. She is very familiar with our students and their needs and is capable of maintaining the program in a way that should have no effect on the student performance levels. As the district has only one library for grades P4 - 12th grade, all sites should see no impact from this waiver.

C. Educational impact to the district: Results of the Statutory Waiver/Deregulation, i.e., effect on student performance levels, impact of plan on other sites in the district.

There will be no negative educational impact to our district.

D. Timeline: Please submit class schedule, calendars, assessment forms and other attachments as necessary, or described in instructions.

A waiver/deregulation can be granted for up to 3 years. (Please see instructions for additional requirements)

We request that the waiver be granted for three (3) years. This will allow additional time for the current library assistant to complete needed coursework for certification.

E. Any financial impact to the District (positive or negative) for the proposed waiver/deregulation.

The waiver will provide a positive financial impact on our district by absorbing Library/Media Specialist position. The savings will be allocated to student instruction and technology.

F. Describe method of assessment or evaluation of effectiveness of the plan.

Principals will monitor and evaluate library assistant's effectiveness and provide recommendation to superintendent. This will be accomplished through formal and informal observations and evaluations.

LIBRARY

... ..

8 September 2020

Oklahoma State Department of Education

Accreditations Standards Division

2500 N Lincoln Blvd, suite 210

Oklahoma City, OK 73105

Accreditations Standard Division,

I am enrolled in the graduate program at Northeastern State University for Library Media and Information Technology. I intend to complete the program by the fall semester of 2021.

Sincerely,



Susana Jackman

Name: Susana Ruth Jackman
 Student-ID: XXXXX0200
 Date of Birth: 05-SEP
 Date Issued: 25-AUG-2020
 Page Number: 1



NORTHEASTERN STATE UNIVERSITY

Tahlequah, Oklahoma 74464-2399

Issued To:
 Susana Jackman
 Parchment DocumentID: 30172866

Course Level: Graduate

Current Program

Master of Science

Major : Library Media and Info Tech,MS

SUBJ NO.	COURSE TITLE	CRED	GRD	PTS R
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INSTITUTION CREDIT:

Spring 2019
 LIBM 5013 INTRODUCTION TO LIBRARIANSHIP 3.00 A 12.00
 Ehrs: 3.00 GPA-Hrs: 3.00 Qpts: 12.00 GPA: 4.00

Graduate Good Standing

Fall 2019
 LIBM 5513 INFO & RESOURCES & SERVICES 3.00 A 12.00
 Ehrs: 3.00 GPA-Hrs: 3.00 Qpts: 12.00 GPA: 4.00

Graduate Good Standing

Summer 2020
 EDUC 5103 EDUCATIONAL RESEARCH 3.00 A 12.00
 Ehrs: 3.00 GPA-Hrs: 3.00 Qpts: 12.00 GPA: 4.00

Graduate Good Standing

Fall 2020
 IN PROGRESS WORK
 EDUC 5463 DIFFERENTIATED INSTRUCT STRAT 3.00 IN PROGRESS
 LIBM 5573 TECH FOR SCHOOL LIBRARIANS 3.00 IN PROGRESS
 LIBM 5611 PROF NETWORKING & DEVELOPMENT 1.00 IN PROGRESS
 In Progress Credits 7.00

***** TRANSCRIPT TOTALS *****

TOTAL INSTITUTION	Earned Hrs	GPA Hrs	Points	GPA
9.00	9.00	36.00	4.00	

TOTAL TRANSFER	Earned Hrs	GPA Hrs	Points	GPA
0.00	0.00	0.00	0.00	

OVERALL	Earned Hrs	GPA Hrs	Points	GPA
9.00	9.00	36.00	4.00	

***** END OF TRANSCRIPT *****

REJECT DOCUMENT IF SIGNATURE IS DISTORTED

AN OFFICIAL SIGNATURE IS WHITE ON A GREEN BACKGROUND

THE NAME OF THE UNIVERSITY IS PRINTED IN WHITE ACROSS THE FACE OF THE 11 X 8 1/2 TRANSCRIPT

JANET E. KELLEY, REGISTRAR

Janet E. Kelley



OKLAHOMA
Rehabilitation Services



Oklahoma School for the Blind

September 9, 2020

Oklahoma State Department of Education
Accreditation Standards Division
2500 North Lincoln Blvd., Suite 210
Oklahoma City OK 73105-4599

To Whom It May Concern:

Oklahoma School for the Blind is requesting a Library Media Specialist waiver. Our Library Media Specialist resigned in July of this year. Susana Jackman, the Library Assistant, has been working with her for the past two years and will do her best to provide the same level of service to our students. She is extremely capable, innovative, and driven to provide excellent service to our students. Mrs. Jackman is currently enrolled in the graduate program at Northeastern State University for Library Media and Information Technology. She is on track to graduate December 2021. At that time, we hope to employ her as our Library Media Specialist.

Please give careful consideration to this request. We feel that this waiver will greatly benefit the students of OSB by allowing us to utilize a quality individual to work in this capacity.

Best regards,

Rita J. Echelle
Superintendent
Oklahoma School for the Blind

3300 Gibson Street, Muskogee, OK 74403
o: 918 781-8200 | f: 918 781-8300 | osb.k12.ok.us | okdrs.gov

Executive Director Melinda Fruendt
Commissioners Theresa Flannery, Wes Hilliard and Jace Wolfe

SCHOOL SITE STATUTORY WAIVER/DEREGULATION

APPLICATION for 20²⁰ – 20²³ school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

ALL SITES (SEE ATTACHED)

NAME OF SITE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

DocuSigned by:

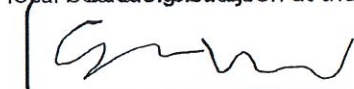
Deborah Gist

9/3/2020

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on January 21, 2020



BOARD PRESIDENT SIGNATURE*

Approved as to Form: RMG

NOTARY SEAL →



NOTARY

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.**

THE WAIVER/DEREGULATION IS REQUESTED FOR:

One Year Only



Three Years*

*Please see instruction page for additional requirements for a three year request

SDE USE ONLY

PROJECT YEARS

4 of 4

ENROLLMENT

High School

Jr./Middle High

Elementary

38509 District Total

9-30-2020

DATE RECEIVED

70 O.S. 3-124

OAC

Library Media Specialist

NAME OF WAIVER

A. Reason for the waiver/deregulation request (be specific).

70 O.S. § 3-126 - Library Media Specialist/waive certification only - teacher attending college/university to obtain Library Media Specialist certification.

The District seeks permission to continue the currently successful Intern LMS (Library Media Specialist) Program, under which we hired certified classroom teachers and college graduates with extensive library experience/education to work as intern librarians.

B. List alternate strategies/plans which the district/site proposes, and how this plan will best serve the students of your district, i.e., a description of the educational benefits to the students and learning achievement.

C. Educational impact to the district: Results of the Statutory Waiver/Deregulation, i.e., effect on student performance levels, impact of plan on other sites in the district.

D. Timeline: Please submit class schedule, calendars, assessment forms and other attachments as necessary, or described in instructions.

A waiver/deregulation can be granted for up to 3 years. (Please see instructions for additional requirements)

District training and support will be provided for our intern librarians as they work towards becoming fully certified librarians.

- * Each new Intern LMS is provided at least one full day training prior to the start of school their first year in the LMS Intern Program.

- * Intern LMS are provided release time to attend mandatory, quarterly training seminars for two school years. A total of 20 hours district training in library management is provided and required annually.

- * Support and assistance are provided by a certified library media specialist teacher/trainer acting as consultant who visits the school as needed throughout the waiver period.

- * Intern LMS are required to be enrolled in a graduate library information studies program, actively working toward library media certification.

- * Library Media Certification is expected at the completion of this program. A three year timeline is targeted for obtaining certification.

E. Any financial impact to the District (positive or negative) for the proposed waiver/deregulation.

There is no financial impact to the district.

F. Describe method of assessment or evaluation of effectiveness of the plan.

Intern LMS will be surveyed at the end of the year, and the library services manager will complete a program evaluation at the conclusion of each school year in three year waiver term to evaluate and improve our intern program.

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA
COUNTY

TULSA PUBLIC SCHOOLS
SCHOOL DISTRICT

3027 S NEW HAVEN AVE
SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK
CITY

74114
ZIP CODE

Marian Anderson Elem.
NAME OF SITE

Donna White 8/21/20
PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE* *Approved as to Form: RMG*

NOTARY SEAL →

NOTARY

DATE

COMMISSION EXPIRATION DATE

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

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 Three Years*

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SDE USE ONLY

PROJECT YEARS

 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

 0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

BELL ELEMENTARY SCH.

NAME OF SITE

Mohazoban Pand

PRINCIPAL SIGNATURE*

DATE

8/14/2020

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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 High School

 Jr./Middle High

 Elementary

 0 District Total

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70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 - 2023 school year

TULSA COUNTY TULSA PUBLIC SCHOOLS
SCHOOL DISTRICT

3027 S NEW HAVEN AVE TULSA, OK 74114
SCHOOL DISTRICT MAILING ADDRESS CITY ZIP CODE

Booker T. Washington High School
NAME OF SITE

Myelisa J. Worthington, Ph.D. 8/11/2020
PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* DATE

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NOTARY DATE

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SDE USE ONLY

PROJECT YEARS

of

ENROLLMENT

High School

Jr./Middle High

Elementary

0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

John Burroughs Elementary

NAME OF SITE

Demetria Isdale

PRINCIPAL SIGNATURE*

8/19/20

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
_for_2020 _ 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Carnegie Elementary

NAME OF SITE

Krista M. Blanche

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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PROJECT YEARS

____ of ____

ENROLLMENT

____ High School

____ Jr./Middle High

____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA

TULSA PUBLIC SCHOOLS

COUNTY

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

TULSA, OK

74114

SCHOOL DISTRICT MAILING ADDRESS

CITY

ZIP CODE

NAME OF SITE

George Washington Carver Middle School

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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ENROLLMENT

 High School

 Jr./Middle High

 Elementary

 0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Celia Clinton Elementary School

NAME OF SITE

Brandy Wall

PRINCIPAL SIGNATURE*

8-26-20

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

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PROJECT YEARS

____ of ____

ENROLLMENT

____ High School

____ Jr./Middle High

____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

NAME OF SITE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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NOTARY

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

NAME OF SITE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA COUNTY TULSA PUBLIC SCHOOLS
SCHOOL DISTRICT

3027 S NEW HAVEN AVE TULSA, OK 74114
SCHOOL DISTRICT MAILING ADDRESS CITY ZIP CODE

Cooper Elementary
NAME OF SITE

Minger Page 8/14/2020
PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* DATE

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BOARD PRESIDENT SIGNATURE* *Approved as to Form: RMG*

NOTARY SEAL →

NOTARY DATE

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Three Years*

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SDE USE ONLY

PROJECT YEARS

of

ENROLLMENT

High School

Jr./Middle High

Elementary

0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA COUNTY TULSA PUBLIC SCHOOLS SCHOOL DISTRICT

3027 S NEW HAVEN AVE TULSA, OK 74114
SCHOOL DISTRICT MAILING ADDRESS CITY ZIP CODE

Council Oak Elementary
NAME OF SITE

[Signature] 8.14.20
PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* DATE

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NOTARY DATE

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SDE USE ONLY

PROJECT YEARS
_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

for 2020 - 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Walt Disney Elementary

NAME OF SITE

Dona Mufod

PRINCIPAL SIGNATURE*

8/13/2020

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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PROJECT YEARS

 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

0 District Total

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NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

for 2020 – 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Dual Language Academy

NAME OF SITE

Imma Sandoval

PRINCIPAL SIGNATURE*

August 12, 2020

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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BOARD PRESIDENT SIGNATURE*

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PROJECT YEARS

 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

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DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

East Central Junior High

NAME OF SITE

S. Buffett

PRINCIPAL SIGNATURE

8/20/20

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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BOARD PRESIDENT SIGNATURE*

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA COUNTY	TULSA PUBLIC SCHOOLS SCHOOL DISTRICT	
3027 S NEW HAVEN AVE SCHOOL DISTRICT MAILING ADDRESS	TULSA, OK CITY	74114 ZIP CODE
East Central High School NAME OF SITE		
Mitel Case PRINCIPAL SIGNATURE*		8-21-2020 DATE

PRINCIPAL SIGNATURE* _____ DATE _____

PRINCIPAL SIGNATURE* _____ DATE _____

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* _____ DATE _____

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE* _____
Approved as to Form: RMG

NOTARY SEAL →

NOTARY _____ DATE _____

COMMISSION EXPIRATION DATE _____

Statute/Oklahoma Administrative Code to be Waived: 70 O.S. § 3-126
(specify statute or OAC (deregulation) number: (see instructions)

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

**THE WAIVER/DEREGULATION
IS REQUESTED FOR:**

_____ One Year Only

_____ Three Years*

*Please see instruction page for additional requirements for a three year request

SDE USE ONLY

PROJECT YEARS
_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED _____

70 O.S. _____

OAC _____

NAME OF WAIVER _____

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 – 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Edison Preparatory

NAME OF SITE



PRINCIPAL SIGNATURE*

08/20/2020

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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BOARD PRESIDENT SIGNATURE*

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NOTARY SEAL →

NOTARY

DATE

COMMISSION EXPIRATION DATE

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

for 20 20 – 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

EISENHOWER INTERNATIONAL ELEMENTARY SCHOOL

Cornie Horner

PRINCIPAL SIGNATURE*

2020-2021

DATE

Cornie Horner

PRINCIPAL SIGNATURE*

2021-2022

DATE

Cornie Horner

PRINCIPAL SIGNATURE*

2022-2023

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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NOTARY

DATE

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Flint Elementary

NAME OF SITE

Marion Helt

PRINCIPAL SIGNATURE*

8/12/20

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 2020

BOARD PRESIDENT SIGNATURE*

Approved as to Form: RMG

NOTARY SEAL →

NOTARY

DATE

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Emerson Montessori

NAME OF SITE

Elizabeth Saylor

PRINCIPAL SIGNATURE*

8.21.2020

DATE

Elizabeth Saylor

PRINCIPAL SIGNATURE*

8.21.2020

DATE

Elizabeth Saylor

PRINCIPAL SIGNATURE*

8.21.2020

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE*

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NOTARY

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

NAME OF SITE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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BOARD PRESIDENT SIGNATURE*

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PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA COUNTY TULSA PUBLIC SCHOOLS
SCHOOL DISTRICT

3027 S NEW HAVEN AVE TULSA, OK 74114
SCHOOL DISTRICT MAILING ADDRESS CITY ZIP CODE

Grissom ES
NAME OF SITE

Bert S. [Signature]
PRINCIPAL SIGNATURE* DATE

[Signature]
PRINCIPAL SIGNATURE* DATE

[Signature]
PRINCIPAL SIGNATURE* DATE

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE*

NOTARY SEAL →

NOTARY DATE

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____ Three Years*

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SDE USE ONLY

PROJECT YEARS
____ of ____

ENROLLMENT

____ High School

____ Jr./Middle High

____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

**SCHOOL SITE STATUTORY WAIVER/DEREGULATION
APPLICATION for 2020 – 2023 school year**

TULSA
COUNTY

TULSA PUBLIC SCHOOLS
SCHOOL DISTRICT

3027 S NEW HAVEN AVE
SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK
CITY

74114
ZIP CODE

Hale Jr. High
NAME OF SITE

[Signature]
PRINCIPAL SIGNATURE*

8/13/2020
DATE

[Signature]
PRINCIPAL SIGNATURE*

8/13/2020
DATE

[Signature]
PRINCIPAL SIGNATURE*

8/13/2020
DATE

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE*

NOTARY SEAL →

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____ One Year Only

____ Three Years*

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requirements for a three year request

SDE USE ONLY

PROJECT YEARS
____ of ____

ENROLLMENT

____ High School

____ Jr./Middle High

____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Hamilton

NAME OF SITE

Lauri Duncan

PRINCIPAL SIGNATURE*

8/12/2020

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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BOARD PRESIDENT SIGNATURE*

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA
COUNTY

TULSA PUBLIC SCHOOLS
SCHOOL DISTRICT

3027 S NEW HAVEN AVE
SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK
CITY

74114
ZIP CODE

Hawthorne Elementary
NAME OF SITE

[Signature]
PRINCIPAL SIGNATURE*

8/11/2020
DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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SDE USE ONLY

PROJECT YEARS
_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

for 2020 – 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

NAME OF SITE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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NOTARY

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA COUNTY TULSA PUBLIC SCHOOLS SCHOOL DISTRICT

3027 S NEW HAVEN AVE SCHOOL DISTRICT MAILING ADDRESS TULSA, OK CITY 74114 ZIP CODE

Dolores Huerta NAME OF SITE

Janice Thormire PRINCIPAL SIGNATURE* 8-10-2020 DATE

PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

DR. DEBORAH GIST SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE* *Approved as to Form: RMG*

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NOTARY DATE

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 One Year Only

 Three Years*

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SDE USE ONLY

PROJECT YEARS
 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

 0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 - 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

John Hope Franklin Elementary

NAME OF SITE

Kelley Blahney

PRINCIPAL SIGNATURE*

8/13/2020

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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BOARD PRESIDENT SIGNATURE*

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NOTARY SEAL →

NOTARY

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA	TULSA PUBLIC SCHOOLS	
COUNTY	SCHOOL DISTRICT	
3027 S NEW HAVEN AVE	TULSA, OK	74114
SCHOOL DISTRICT MAILING ADDRESS	CITY	ZIP CODE

Kendall-Whittier E.S.
NAME OF SITE

Ronda Lester 8/13/20
PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* DATE

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BOARD PRESIDENT SIGNATURE* *Approved as to Form: RMG*

NOTARY SEAL →

NOTARY DATE

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SDE USE ONLY

PROJECT YEARS
_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Kerr Elementary

NAME OF SITE

Mollie Miller

PRINCIPAL SIGNATURE*

8-13-20

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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BOARD PRESIDENT SIGNATURE*

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☒ One Year Only

☐ Three Years*

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SDE USE ONLY

PROJECT YEARS

 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

 0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA
COUNTY

TULSA PUBLIC SCHOOLS
SCHOOL DISTRICT

3027 S NEW HAVEN AVE
SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK
CITY

74114
ZIP CODE

Key Elementary School
NAME OF SITE


PRINCIPAL SIGNATURE*

8/21/2020
DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE*

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NOTARY

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_____ Three Years*

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SDE USE ONLY

PROJECT YEARS
_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

**SCHOOL SITE STATUTORY WAIVER/DEREGULATION
APPLICATION for 2020 – 2023 school year**

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Lanier ES

NAME OF SITE

Angie C. Deas

PRINCIPAL SIGNATURE*

DATE

8/12/2020

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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BOARD PRESIDENT SIGNATURE*

NOTARY SEAL →

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA COUNTY TULSA PUBLIC SCHOOLS
SCHOOL DISTRICT

3027 S NEW HAVEN AVE TULSA, OK 74114
SCHOOL DISTRICT MAILING ADDRESS CITY ZIP CODE

Lindbergh Elementary
NAME OF SITE

[Signature] 8/12/20
PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE*

NOTARY SEAL →

NOTARY DATE

COMMISSION EXPIRATION DATE

Statute/Oklahoma Administrative Code to be Waived: 70 O.S. § 3-126
(specify statute or OAC (deregulation) number: (see instructions))

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

THE WAIVER/DEREGULATION IS REQUESTED FOR:

_____ One Year Only

_____ Three Years*

*Please see instruction page for additional requirements for a three year request

SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA COUNTY
TULSA PUBLIC SCHOOLS SCHOOL DISTRICT

3027 S NEW HAVEN AVE TULSA, OK 74114
SCHOOL DISTRICT MAILING ADDRESS CITY ZIP CODE

MacArthur Elementary
NAME OF SITE

[Signature] 8-13-20
PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE* *Approved as to Form: RMG*

NOTARY SEAL →

NOTARY DATE

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SDE USE ONLY

PROJECT YEARS
_____ of _____

ENROLLMENT

_____ High School
_____ Jr./Middle High
_____ Elementary
0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Marshall Elementary

NAME OF SITE

Kristy Zet

PRINCIPAL SIGNATURE*

8-14-2020

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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BOARD PRESIDENT SIGNATURE*

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NOTARY

DATE

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 One Year Only

 Three Years*

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SDE USE ONLY

PROJECT YEARS

 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

 0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

for 2020 – 2023 school year

TULSA COUNTY
TULSA PUBLIC SCHOOLS SCHOOL DISTRICT

3027 S NEW HAVEN AVE
SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK
CITY

74114
ZIP CODE

Mayo
NAME OF SITE

Kenneth S. Joslin
PRINCIPAL SIGNATURE*

8/14/2020
DATE

PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 2020

BOARD PRESIDENT SIGNATURE* Approved as to Form: RMG

NOTARY SEAL →

NOTARY DATE

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 Three Years*

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SDE USE ONLY

PROJECT YEARS
 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

**SCHOOL SITE STATUTORY WAIVER/DEREGULATION
APPLICATION for 2020 – 2023 school year**

TULSA COUNTY TULSA PUBLIC SCHOOLS
SCHOOL DISTRICT

3027 S NEW HAVEN AVE TULSA, OK 74114
SCHOOL DISTRICT MAILING ADDRESS CITY ZIP CODE

McClure Elementary
NAME OF SITE

Kathy Sumner 8-12-20
PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* DATE

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NOTARY DATE

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 One Year Only

 Three Years*

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requirements for a three year request

SDE USE ONLY

PROJECT YEARS

 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

 0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

McKinley Elementary School

NAME OF SITE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

McLain HS for Science & Technology

NAME OF SITE

Renee Ralasky

PRINCIPAL SIGNATURE*

8/25/2020

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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PROJECT YEARS

 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

 0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

for 2020 – 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Memorial High School

NAME OF SITE

Dr. Robert G.

PRINCIPAL SIGNATURE*

08-12-20

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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 One Year Only

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SDE USE ONLY

PROJECT YEARS

 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Memorial Middle School

NAME OF SITE

[Signature]

PRINCIPAL SIGNATURE*

8-21-20

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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PROJECT YEARS

 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

 0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 – 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Mitchell Elementary

NAME OF SITE

Tammy Shelton

PRINCIPAL SIGNATURE*

8-11-20

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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SDE USE ONLY

PROJECT YEARS

 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

 0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

NAME OF SITE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA COUNTY TULSA PUBLIC SCHOOLS
SCHOOL DISTRICT

3027 S NEW HAVEN AVE TULSA, OK 74114
SCHOOL DISTRICT MAILING ADDRESS CITY ZIP CODE

Owen Elementary School
NAME OF SITE

Deborah A. Gist 8/18/2020
PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* DATE

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BOARD PRESIDENT SIGNATURE* *Approved as to Form: RMG*

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NOTARY DATE

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____ Three Years*

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SDE USE ONLY

PROJECT YEARS

____ of ____

ENROLLMENT

____ High School

____ Jr./Middle High

____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

NAME OF SITE

Peary E.S.

PRINCIPAL SIGNATURE*

Lena L. Crow

DATE

8/14/20

PRINCIPAL SIGNATURE*

Lena L. Crow

DATE

8/14/20

PRINCIPAL SIGNATURE*

Lena L. Crow

DATE

8/14/20

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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NOTARY

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PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA
COUNTY

TULSA PUBLIC SCHOOLS
SCHOOL DISTRICT

3027 S NEW HAVEN AVE
SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK
CITY

74114
ZIP CODE

Project Accept TRAICE
NAME OF SITE

[Signature]
PRINCIPAL SIGNATURE*

8-21-2020
DATE

[Signature]
PRINCIPAL SIGNATURE*

8-21-2020
DATE

[Signature]
PRINCIPAL SIGNATURE*

8-21-2020
DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our
local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE*

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DATE

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 – 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Robertson

NAME OF SITE

Kristen Smith

PRINCIPAL SIGNATURE*

8/24/20

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE*

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_____ Three Years*

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

for 2020 – 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

WILL ROGERS COLLEGE HIGH SCHOOL & MIDDLE SCHOOL

NAME OF SITE

Deborah Gist

PRINCIPAL SIGNATURE*

8/12/2020

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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BOARD PRESIDENT SIGNATURE*

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NOTARY

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 One Year Only

 Three Years*

*Please see instruction page for additional requirements for a three year request

SDE USE ONLY

PROJECT YEARS

 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA	TULSA PUBLIC SCHOOLS	
COUNTY	SCHOOL DISTRICT	
3027 S NEW HAVEN AVE	TULSA, OK	74114
SCHOOL DISTRICT MAILING ADDRESS	CITY	ZIP CODE
NAME OF SITE <u>Salk Elementary</u>		
PRINCIPAL SIGNATURE* <u>Mari Thomas</u>	DATE <u>8-20-2020</u>	

PRINCIPAL SIGNATURE* _____ DATE _____

PRINCIPAL SIGNATURE* _____ DATE _____

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* _____ DATE _____

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE* _____

Approved as to Form: RMG

NOTARY SEAL →

NOTARY _____ DATE _____

COMMISSION EXPIRATION DATE _____

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_____ Three Years*

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SDE USE ONLY

PROJECT YEARS
_____ of _____

ENROLLMENT

_____ High School
_____ Jr./Middle High
_____ Elementary
0 District Total

DATE RECEIVED _____

70 O.S. _____

OAC _____

NAME OF WAIVER _____

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Sequoiah ES

NAME OF SITE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE*

Approved as to Form: RMG

NOTARY SEAL →

NOTARY

DATE

COMMISSION EXPIRATION DATE

Statute/Oklahoma Administrative Code to be Waived: 70 O.S. § 3-126
(specify statute or OAC (deregulation) number: (see instructions))

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

**THE WAIVER/DEREGUALTION
IS REQUESTED FOR:**

____ One Year Only

____ Three Years*

*Please see instruction page for additional requirements for a three year request

SDE USE ONLY

PROJECT YEARS

____ of ____

ENROLLMENT

____ High School

____ Jr./Middle High

____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

for 20 20 - 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Skelly Elementary

NAME OF SITE

Jennifer Pense

PRINCIPAL SIGNATURE*

08/22/20

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE*

NOTARY SEAL →

Approved as to Form: RMG

NOTARY

DATE

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_____ Three Years*

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

for 2020 – 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Springdale Elementary School

NAME OF SITE

PRINCIPAL SIGNATURE*

DATE

Diana J. F.

PRINCIPAL SIGNATURE*

m

8/13/2020

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE*

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NOTARY SEAL →

NOTARY

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 Three Years*

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SDE USE ONLY

PROJECT YEARS

 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 2020 – 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Thoreau Demonstration Academy

NAME OF SITE

PRINCIPAL SIGNATURE*

DATE

8/12/20

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

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NOTARY

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SDE USE ONLY

PROJECT YEARS

 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

 0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Wayman Tisdale Fine Arts Academy ES

NAME OF SITE

Elaine Burton mm

PRINCIPAL SIGNATURE*

8-24-2020

DATE

Elaine Burton mm

PRINCIPAL SIGNATURE*

8-24-2020

DATE

Elaine Burton mm

PRINCIPAL SIGNATURE*

8-24-2020

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE* Approved as to Form: RMG

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NOTARY

DATE

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SDE USE ONLY

PROJECT YEARS

 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

 0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

**SCHOOL SITE STATUTORY WAIVER/DEREGULATION
APPLICATION for 2020 – 2023 school year**

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

TULSA LEARNING ACADEMY

NAME OF SITE


PRINCIPAL SIGNATURE*

8-12-20

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 2020

BOARD PRESIDENT SIGNATURE*

NOTARY SEAL →

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NOTARY

DATE

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

**SCHOOL SITE STATUTORY WAIVER/DEREGULATION
APPLICATION for 2020 – 2023 school year**

TULSA
COUNTY

TULSA PUBLIC SCHOOLS
SCHOOL DISTRICT

3027 S NEW HAVEN AVE
SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK
CITY

74114
ZIP CODE

TRAIL Academy
NAME OF SITE

R. J. O'Neil
PRINCIPAL SIGNATURE*

8/11/2020
DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE*

Approved as to Form: RMG

NOTARY SEAL →

NOTARY

DATE

COMMISSION EXPIRATION DATE

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_____ Three Years*

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 – 20 23 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

Tulsa MET Junior High & High School

NAME OF SITE

Vicki F.

PRINCIPAL SIGNATURE*

August 26, 2020

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE*

Approved as to Form: RMG

NOTARY SEAL →

NOTARY

DATE

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_____ Three Years*

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

**SCHOOL SITE STATUTORY WAIVER/DEREGULATION
APPLICATION for 2020 – 2023 school year**

TULSA
COUNTY

TULSA PUBLIC SCHOOLS
SCHOOL DISTRICT

3027 S NEW HAVEN AVE
SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK
CITY

74114
ZIP CODE

Unity Learning Academy
NAME OF SITE

Ara Henderson
PRINCIPAL SIGNATURE*

8/12/2020
DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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 One Year Only

 Three Years*

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SDE USE ONLY

PROJECT YEARS
 of

ENROLLMENT

 High School

 Jr./Middle High

 Elementary

 0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

for 2020 – 2023 school year

TULSA COUNTY TULSA PUBLIC SCHOOLS SCHOOL DISTRICT

3027 S NEW HAVEN AVE TULSA, OK 74114
SCHOOL DISTRICT MAILING ADDRESS CITY ZIP CODE

Webster Middle/High School
NAME OF SITE

Sheely Holman 8-12-20
PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

PRINCIPAL SIGNATURE* DATE

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on JANUARY 21, 2020

BOARD PRESIDENT SIGNATURE* *Approved as to Form: RMG*

NOTARY SEAL →

NOTARY DATE

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SDE USE ONLY

PROJECT YEARS

____ of ____

ENROLLMENT

____ High School

____ Jr./Middle High

____ Elementary

0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

for 2020 – 2023 school year

TULSA

COUNTY

TULSA PUBLIC SCHOOLS

SCHOOL DISTRICT

3027 S NEW HAVEN AVE

SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK

CITY

74114

ZIP CODE

NAME OF SITE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

PRINCIPAL SIGNATURE*

DATE

DR. DEBORAH GIST

SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG

SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE*

DATE

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_____ Three Years*

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SDE USE ONLY

PROJECT YEARS

_____ of _____

ENROLLMENT

_____ High School

_____ Jr./Middle High

_____ Elementary

0 District Total

DATE RECEIVED

70 O.S.

OAC

NAME OF WAIVER

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION
for 20 20 - 20 23 school year

TULSA
COUNTY

TULSA PUBLIC SCHOOLS
SCHOOL DISTRICT

3027 S NEW HAVEN AVE
SCHOOL DISTRICT MAILING ADDRESS

TULSA, OK
CITY

74114
ZIP CODE

Zarrow International
NAME OF SITE

Denise Marquez
PRINCIPAL SIGNATURE* DATE

Denise Marquez
PRINCIPAL SIGNATURE* DATE

Denise Marquez
PRINCIPAL SIGNATURE* DATE

DR. DEBORAH GIST
SUPERINTENDENT NAME (PLEASE PRINT)

GISTDE@TULSASCHOOLS.ORG
SUPERINTENDENT E-MAIL ADDRESS

SUPERINTENDENT SIGNATURE* DATE

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local board of education at the meeting on JANUARY 21, 20 20

BOARD PRESIDENT SIGNATURE*

NOTARY SEAL → *Approved as to Form: RMG*

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____ Three Years*

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SDE USE ONLY

PROJECT YEARS
____ of ____

ENROLLMENT

____ High School
____ Jr./Middle High
____ Elementary
0 District Total

DATE RECEIVED

70 O.S. _____

OAC _____

NAME OF WAIVER



TULSA PUBLIC SCHOOLS

EQUITY CHARACTER EXCELLENCE TEAM JOY

To: Oklahoma State Department of Education
From: Kristin Dargel Swindell
Tulsa Public Schools
Date: October 2, 2019
RE: Library Waiver – Certification Intent

Dear Sir or Madam:

I am in process of obtaining my Library Media Specialist Certification through the library media specialist program at Oklahoma State University I intend to work at Celia Clinton under the library waiver offered by the Oklahoma State Department of Education (70 O.S. § 3-126). I understand that I will have three years to complete this program and be fully certified through the Oklahoma state Department of Education in Library Media Specialist in order to continue in a certified library position. *

Best,

Kristin Dargel Swindell

Kristin Dargel Swindell

DESTINATION EXCELLENCE

3027 SOUTH NEW HAVEN AVENUE | TULSA, OKLAHOMA 74114

918.746.6800 | www.tulsaschools.org



December 13, 2017

N00059255
Kathleen M Berrigan
14474 S Kendalwood
Glenpool, OK 74033

CERTIFICATE OF GRADUATE ADMISSION for **Summer 2018**

This certificate is confirmation of your admission to the Graduate College of Northeastern State University. Your application indicates that you wish to be admitted to the **M.S., Library Media & Information Technology** degree program.

Information regarding your assigned advisor and methods of contact are listed at the bottom of this letter. You should schedule an appointment to see your advisor prior to enrolling. Your advisor will assist you in meeting program admission requirements and filing a plan of study. Your entrance exam must be taken before the close of your first semester of graduate studies. Failure to submit your score will result in your enrollment being blocked.

Please be advised that admission into the Graduate College does not grant you admission into your selected program. You should see your adviser for program admission details.

You are subject to the terms, degree plan, and specifications of the University Catalog and the Graduate Catalog for the academic year in which you matriculate. If you are a returning student, you are subject to the academic requirements of the catalog for the year in which you return.

To activate your student account, you will need to visit the graduate college homepage at this link:
<https://academics.nsuok.edu/graduatecollege/GraduateHome.aspx>

At the graduate college homepage, select "**next steps**". This link will provide you with step-by-step instructions on how to set up your account, check your email, check your holds, and how to enroll.

It is recommended that you visit the goNSU portal from the NSU homepage frequently to view your status. This will be the means in which you can contact your advisor, process enrollment and view your grades. If you need assistance, please call the Help Desk at 918-444-5678.

Should you have additional questions, please contact the Graduate College.

Sincerely,

Cari Keller, J.D.
Dean, Graduate College

Advisor: Dr. Alesha Baker

Email: bakera@nsuok.edu

Program Information:

<https://academics.nsuok.edu/graduatecollege/DegreesCertificate.aspx>



NORTHEASTERN
STATE UNIVERSITY

Worksheets

Name
Berrigan, Kathleen M

Degree
Master of Science

Level Graduate Classification Graduate Master

Major Library Media and Info Tech, MS Program MS - Library Media/Info Tech

College Education

Previous Degrees Univ of Central Oklahoma BA Journalism/PR 09-MAY-08

Previous Degree BA Advisors Alesha Baker (Primary) NSU GPA (GR) 4.000

NSU Earned Hours (GR) 28 NSU GPA Hours (GR) 28 Overall GPA (GR) 4.000

Overall Earned Hours (GR) 28 Overall GPA Hours (GR) 28

Degree Progress (This is an estimation of your degree progress, based on the number of boxes checked below)



Overall GPA

4.000

Requirements

Audit date 5/22/2020 12:09 AM

Degree in Master of Science

INCOMPLETE

Catalog Term: Summer 2018

☒ You meet the minimum
GPA requirement.

☐ Major Requirements

Still
needed:

See [Major in Library Media and Info Tech, MS](#)
section

Major in Library Media and Info Tech, MS

INCOMPLETE

Catalog Term: Summer 2018

Unmet conditions for this set of requirements: 3 Hours needed

NOTE: ANY 4,000 LEVEL COURSE TAKEN FOR GRADUATE CREDITREQUIRES A SIGNED CONTRACT PRIOR TO ENROLLING.

Your current major GPA is 4.000.

	Course	Title	Grade	Credits	Term
<input checked="" type="checkbox"/> Program Admission Requirement	Graduate Program Admission		Y		
<input checked="" type="checkbox"/> File Degree Plan	Graduate Plan of Study		Y		
<input checked="" type="checkbox"/> MAT or GRE Exam is required.					
<input checked="" type="checkbox"/> MAT Passed	MATT Millers Analogy Test		406		
<input type="checkbox"/> PROFESSIONAL EDUCATION-3 Hours					

○ Qualitative Research Still needed: 3 Credits in [EDUC 5143](#)

① SPECIALIZED COURSES-
22 Hours

✓	Introduction to Librarianship	LIBM 5013	INTRODUCTION TO LIBRARIANSHIP	A	3	Fall 2018
✓	Advanced Materials for Children	LIBM 5023	ADV MATERIALS FOR CHILDREN	A	3	Fall 2019
✓	School Library Administration	LIBM 5123	SCHOOL LIBRARY ADMINISTRATION	A	3	Spring 2020
✓	Advanced Materials for Young Adults	LIBM 5313	ADV MATERIALS FOR YOUNG ADULTS	A	3	Fall 2019
✓	Collection Development & Mgmt of School Libraries	LIBM 5413	ACQ & ORG OF LIBRARY MATERIALS	A	3	Spring 2019
✓	Information Resources and Service	LIBM 5513	INFO & RESOURCES & SERVICES	A	3	Summer 2018

①	School Library Leadership & Advocacy	LIBM 5523	SCHOOL LIB LEADER & ADVOCACY	IP	(3)	Summer 2020
✓	Professional Networking & Development	LIBM 5611	PROF NETWORKING & DEVELOPMENT	A	1	Fall 2019
✓	Technology in STEM Education	EDUC 5823	ADV TECHNOLOGY IN EDUCATION	A	3	Spring 2019
✓	Reading Enrichment	READ 5113	EMERGENT & EARLY LIT DEV	A	3	Fall 2018
①	Practicum	LIBM 5902	PRACTICUM	IP	(2)	Fall 2020

General Electives and Other Credits

Credits applied: 3 Classes applied: 1

Course	Title	Grade	Credits	Term
EDUC 5103	EDUCATIONAL RESEARCH	A	3	Spring 2020

Program Admission Requirement

Y

Degree Plan Requirement

Y

In-progress and Preregistered

Credits applied: 5 Classes applied: 2

Course	Title	Grade	Credits	Term
LIBM 5523	SCHOOL LIB LEADER & ADVOCACY	IP	(3)	Summer 2020
LIBM 5902	PRACTICUM	IP	(2)	Fall 2020

Legend



Complete

Not
completeComplete
except for
classes in-
progressNearly
complete -
see advisor

Prerequisite

Any
course
number

Disclaimer

You are encouraged to use this degree audit report as a guide when planning your progress toward completion of the above requirements. Contact your academic advisor for assistance in interpreting this report or regarding your official degree/certificate completion status. This audit is not your academic transcript and it is not official notification of completion of degree or certificate

5/24/2020

Dashboard

requirements. Please contact the Registrar's Office to obtain a copy of your official academic transcript.

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TULSA PUBLIC SCHOOLS

EQUITY CHARACTER EXCELLENCE TEAM JOY

To: Oklahoma State Department of Education

From: Kathleen Berrigan

Tulsa Public Schools

Date: 9/25/2020

RE: Library Waiver – Certification Intent

Dear Sir or Madam:

I am in process of obtaining my Library Media Specialist Certification through the library media specialist program at Northeastern State University. I intend to work at Hawthorne Elementary under the library waiver offered by the Oklahoma State Department of Education (70 O.S. § 3-126). I understand that I will have three years to complete this program and be fully certified through the Oklahoma state Department of Education in Library Media Specialist in order to continue in a certified library position.

Best,

Kathleen Berrigan

DESTINATION EXCELLENCE

3027 SOUTH NEW HAVEN AVENUE | TULSA, OKLAHOMA 74114

918.746.6800 | www.tulsaschools.org

Bland, Amanda

From: Bouwkamp, Ivy
Sent: Friday, September 25, 2020 11:12 AM
To: Bland, Amanda
Subject: Fw: Graduate Studies Admission - UCO JCGS
Attachments: Now that you are admitted.pdf; Advisers list 4.2018.pdf; scan_herbeke_2018-08-21-13-41-38.pdf

Amanda,

I'm currently in quarantine and don't have access to a printer, but I found the original documents I emailed to Bradley Eddy when I first started.

Ivy

From: Bouwkamp, Ivy
Sent: Tuesday, August 21, 2018 2:27 PM
To: Eddy, Bradley <Eddybr@tulsaschools.org>
Cc: Herbert, Kelly <herbeke@tulsaschools.org>; Howard, Douglas <Howardo@tulsaschools.org>
Subject: FW: Graduate Studies Admission - UCO JCGS

Hi Bradley,

I've forwarded the email that stated that I had been admitted to UCO's library program. I've also forwarded the attachments that came with the email along with a signed copy of my letter.

Thanks,
Ivy Bouwkamp

From: Ivy Bouwkamp [mailto:Ivy.Bouwkamp@hotmail.com]
Sent: Tuesday, August 21, 2018 2:02 PM
To: Bouwkamp, Ivy <bouwkiv@tulsaschools.org>
Subject: Fw: Graduate Studies Admission - UCO JCGS

From: Taro Iwase <tiwase@uco.edu>
Sent: Tuesday, May 29, 2018 1:34 PM
To: ivy.bouwkamp@hotmail.com
Cc: Michelle Robertson; Carlie Wellington
Subject: Graduate Studies Admission - UCO JCGS

May 29, 2018

Ivy Bouwkamp

1400 W Trenton St
Broken Arrow, OK
74012-0482

Student ID: *20476155

Dear Ivy Bouwkamp,

Congratulations! I am pleased to inform you that you have been admitted to the Master of Education in Library Media Education at the University of Central Oklahoma beginning the Fall 2018 semester. We are excited to assist you in completing this program.

There are a few steps to begin your studies:

1. Develop a formal plan of study: Included in this admissions packet is a list of graduate program advisors. Please contact your advisor to develop a formal plan of study prior to enrolling in your first semester.
2. You can find out your enrollment date by visiting www.uco.edu/registrar and clicking on, "Enrollment Dates". More detailed steps on enrollment can also be found in the enclosed packet.
3. If you are applying for financial aid, you will need to submit your plan of study to the financial aid office in 141 Nigh University Center. You will also want to ensure your Free Application for Federal Student Aid is completed as soon as possible. This can be done at www.fafsa.ed.gov.
4. If you are receiving VA benefits, a plan of study, signed by your graduate advisor, must be submitted immediately to the Jackson College of Graduate Studies in 404 Nigh University Center for you to receive VA benefits.

Again, we are so pleased you have chosen the University of Central Oklahoma and look forward to all you will accomplish in your graduate degree pursuits. Degree requirements are listed in the UCO graduate catalog which can be found at www.uco.edu/graduate. This is a legal document in effect at the time of admission. Included in the catalog, you can also find rules on your time allotted to complete your degree.

Welcome to the UCO community of scholars pursuing graduate degrees at UCO! If I can help you in any way, please do not hesitate to contact my office.

Sincerely,

Dr. Richard M. Bernard
Dean

RMB/ti

Regards,

Taro Iwase
Admissions Specialist

University of Central Oklahoma
Jackson College of Graduate Studies
100 N. University Dr. NUC Room 404

Edmond, OK 73034
Email: tiwase@uco.edu
Office: (405) 974-2527
Fax: (405) 974-3852

CONFIDENTIALITY NOTE: This email message and all attachments transmitted with it may contain legally privileged and confidential information intended solely for the use of the intended recipient, or the employee or agent responsible to deliver it to the intended recipient. You are hereby notified that any reading, dissemination, disclosure, distribution, copying or other use of this information without the permission of the University of Central Oklahoma is strictly prohibited. If you have received this message in error, please notify the sender immediately by telephone at (405.974.3341); or by electronic mail to (gradcoll@uco.edu).



TULSA PUBLIC SCHOOLS

EQUITY CHARACTER EXCELLENCE TEAM JOY

To: Oklahoma State Department of Education
From: Ivy Bouwkamp
Date: 08/21/2018
RE: Library Media Specialist Waiver

Dear Sir or Madam:

I am writing this letter to express my interest in the Library Media Specialist role at Tulsa Public Schools. I am gradually learning the foundational skills for becoming a great library specialist and wish to improve my skills while working in the position and completing the Library Media Specialist program at the University of Central Oklahoma.

I intend to be receive certification through my current program within the next three years and will receive support from certified teachers and administrators at Key Elementary. Thank you for your consideration.

If you need additional information, please contact me at 918-884-8209.

Sincerely,

Ivy Bouwkamp

DESTINATION EXCELLENCE

3027 SOUTH NEW HAVEN AVENUE | TULSA, OKLAHOMA 74114

918.746.6800 | www.tulsaschools.org



NORTHEASTERN
STATE UNIVERSITY

Enrollment Verification

Student Name: **Rebecca Bristow**

Student ID number: **N00243044**

Student classification: Bachelor(undergraduate) _____ Master(graduate) **XXX** _____

Enrollment Status: Full Time _____ Part Time **6 Hours** _____ Less than Part Time _____

BACHELOR

MASTER

12 or more hrs = Full Time

6-11 hrs = Part Time

Summer:

6 or more hrs = Full Time

3-5 hrs = Part Time

9 or more hrs = Full Time

5-8 hrs = Part Time

Summer:

5 or more hrs = Full Time

3-4 hrs = Part Time

Semester/ Hours: Summer (5/11/20-8/13/20) _____ Fall (8/17/20-12/11/20) **X** _____ Spring (1/13/20-5/08/20) _____

Expected date of graduation: May 2022

The above information has been verified by Northeastern State University's Office of the Registrar.
Should you have any questions or concerns please contact our office via email at registrar@nsuok.edu.


Janet Kelley, Registrar

09/25/2020

Date

OFFICE OF THE REGISTRAR

701 N. Grand Ave. | Tahlequah, OK 74464 | P 918.444.2208 | F 918.458.9638

www.nsuok.edu



TULSA PUBLIC SCHOOLS

EQUITY CHARACTER EXCELLENCE TEAM JOY

To: Oklahoma State Department of Education
From: Rebecca Bristow
Tulsa Public Schools
Date: 9/25/2020
RE: Library Waiver – Certification Intent

Dear Sir or Madam:

I am in process of obtaining my Library Media Specialist Certification through the library media specialist program at Northeastern State University. I intend to work at Skelly Elementary under the library waiver offered by the Oklahoma State Department of Education (70 O.S. § 3-126). I understand that I will have three years to complete this program and be fully certified through the Oklahoma state Department of Education in Library Media Specialist in order to continue in a certified library position.

Best,

Rebecca Bristow

DESTINATION EXCELLENCE

3027 SOUTH NEW HAVEN AVENUE | TULSA, OKLAHOMA 74114

918.746.6800 | www.tulsaschools.org



TULSA PUBLIC SCHOOLS

EQUITY CHARACTER EXCELLENCE TEAM JOY

To: Oklahoma State Department of Education
From: Sandra Ferguson
Tulsa Public Schools
Date: September 25, 2020
RE: Library Waiver – Certification Intent

Dear Sir or Madam:

I am in process of obtaining my Library Media Specialist Certification through the library media specialist program at Northeast State University. I intend to work at Hale Jr. High School under the library waiver offered by the Oklahoma State Department of Education (70 O.S. § 3-126). I understand that I will have three years to complete this program and be fully certified through the Oklahoma state Department of Education in Library Media Specialist in order to continue in a certified library position.

Best,

Sandra Ferguson

DESTINATION EXCELLENCE

3027 SOUTH NEW HAVEN AVENUE | TULSA, OKLAHOMA 74114

918.746.6800 | www.tulsaschools.org



NORTHEASTERN
STATE UNIVERSITY

August 15, 2019

N00236254
Sandra D Ferguson
12501 E79 Ct N
Owasso, OK 74055

CERTIFICATE OF GRADUATE ADMISSION for Fall 2019

This certificate is confirmation of your admission to the Graduate College of Northeastern State University. Your application indicates that you wish to be admitted to the **M.S., Library Media & Information Technology** degree program.

Information regarding your assigned advisor and methods of contact are listed at the bottom of this letter. You should schedule an appointment to see your advisor prior to enrolling. Your advisor will assist you in meeting program admission requirements and filing a plan of study. Your entrance exam must be taken before the close of your first semester of graduate studies. Failure to submit your score will result in your enrollment being blocked.

Please be advised that admission into the Graduate College does not grant you admission into your selected program. You should see your advisor for program admission details.

You are subject to the terms, degree plan, and specifications of the University Catalog and the Graduate Catalog for the academic year in which you matriculate. If you are a returning student, you are subject to the academic requirements of the catalog for the year in which you return.

To activate your student account, you will need to visit the graduate college homepage at this link:
<https://academics.nsuok.edu/graduatecollege/GraduateHome.aspx>

At the graduate college homepage, select "*next steps*". This link will provide you with step-by-step instructions on how to set up your account, check your email, check your holds, and how to enroll.

It is recommended that you visit the goNSU portal from the NSU homepage frequently to view your status. This will be the means in which you can contact your advisor, process enrollment and view your grades. If you need assistance, please call the Help Desk at 918-444-5678.

Should you have additional questions, please contact the Graduate College.

Sincerely,

Cari Keller, J.D.
Dean, Graduate College

Advisor: Dr. Kelli Carney

Email: carneyka@nsuok.edu

Program Information:

<https://academics.nsuok.edu/graduatecollege/DegreesCertificate.aspx>



NORTHEASTERN
STATE UNIVERSITY

April 2, 2018

N00169236
LaDawna Knighten
2511 W Fairview St
Tulsa, OK 74127

CERTIFICATE OF GRADUATE ADMISSION for **Summer 2018**

This certificate is confirmation of your admission to the Graduate College of Northeastern State University. Your application indicates that you wish to be admitted to the **M.S., Library Media & Information Technology** degree program.

Information regarding your assigned advisor and methods of contact are listed at the bottom of this letter. You should schedule an appointment to see your advisor prior to enrolling. Your advisor will assist you in meeting program admission requirements and filing a plan of study. Your entrance exam must be taken before the close of your first semester of graduate studies. Failure to submit your score will result in your enrollment being blocked.

Please be advised that admission into the Graduate College does not grant you admission into your selected program. You should see your adviser for program admission details.

You are subject to the terms, degree plan, and specifications of the University Catalog and the Graduate Catalog for the academic year in which you matriculate. If you are a returning student, you are subject to the academic requirements of the catalog for the year in which you return.

To activate your student account, you will need to visit the graduate college homepage at this link:
<https://academics.nsuok.edu/graduatecollege/GraduateHome.aspx>

At the graduate college homepage, select "**next steps**". This link will provide you with step-by-step instructions on how to set up your account, check your email, check your holds, and how to enroll.

It is recommended that you visit the goNSU portal from the NSU homepage frequently to view your status. This will be the means in which you can contact your advisor, process enrollment and view your grades. If you need assistance, please call the Help Desk at 918-444-5678.

Should you have additional questions, please contact the Graduate College.

Sincerely,

Cari Keller, J.D.
Dean, Graduate College

Advisor: Dr. Alesha Baker

Email: bakera@nsuok.edu

Program Information:

<https://academics.nsuok.edu/graduatecollege/DegreesCertificate.aspx>




NORTHEASTERN
STATE UNIVERSITY

September 29, 2020

To Whom It May Concern:

This letter is verification that I am enrolled in the M.S. Library and Information Technology program at NSU. In 2018, I agreed to obtain a Library Media Specialist Waiver from the Oklahoma Department of Education and fulfill the requirements for the waiver. I have an anticipation of completion from the graduate program at NSU in the summer of 2021.


Best Regards,



LaDawna Knighten

Academic Transcript

A11319434 Kristin N. Dargel
Aug 21, 2020 09:22 am
Your current Institution is OSU

 This is not an official transcript, and will not reflect final grades until they have been rolled to history after the end of the term. To view final grades as instructors submit them before they appear on your transcript, select View Grades from the Student Records menu.

Temporary placeholder courses, such as TEMP XXXX and UNIV 0XXX, show at the bottom of the unofficial transcript as COURSES IN PROGRESS after a term is finished. They do not display on the official transcript

Institution Credit Transcript Totals Courses in Progress

Transcript Data

STUDENT INFORMATION

Name : Kristin N. Dargel

Birth Date: 11-APR

Student Type: Readmit

Curriculum Information

Latest Curriculum

Graduate Certificate

College: Education Health & Aviation

Major: School Library Certification

***Transcript type:Unofficial Transcript is NOT Official ***

DEGREES AWARDED

Awarded: Master of **Degree Date:** Dec 14, 2019

Science

Curriculum Information

College: Education Health & Aviation
 Major: Educational Technology
 Major Concentration: Educational Technology

INSTITUTION CREDIT -Top-

Term: Spring 2018

Academic Standing: Good Standing

Subject	Course	Level	Title	Grade	Credit Hours	Quality Points	R
EDTC	5113	GR	Digital Media Prod	A	3.000	12.000	
LBSC	5613	GR	Lib Networks & Databases	A	3.000	12.000	
				Attempt Hours	Passed Hours	Earned Hours	
Current Term:				6.000	6.000	6.000	
Cumulative:				6.000	6.000	6.000	

Unofficial Transcript

Term: Summer 2018

Academic Standing: Good Standing

Subject	Course	Level	Title	Grade	Credit Hours	Quality Points	R
EDTC	5403	GR	Tech Innov & Creat In Class	A	3.000	12.000	
EDTC	5753	GR	Intro to Inst Design	A	3.000	12.000	
				Attempt Hours	Passed Hours	Earned Hours	
Current Term:				6.000	6.000	6.000	
Cumulative:				12.000	12.000	12.000	

Unofficial Transcript

Term: Fall 2018

Academic Standing: Good Standing

Subject	Course	Level	Title	Grade	Credit Hours	Quality Points	R
EDTC	5053	GR	Learning in a Digital Age	A	3.000	12.000	

8/21/2020

Academic Transcript

EDTC	5103	GR	Adv Comp Appl In Ed				A	3.000	12.000
				Attempt Hours	Passed Hours	Earned Hours	GPA Hours	Quality Points	GPA
Current Term:				6.000	6.000	6.000	6.000	24.000	4.000
Cumulative:				18.000	18.000	18.000	18.000	72.000	4.000

Unofficial Transcript

Term: Spring 2019

Academic Standing: Good Standing

Subject	Course	Level	Title				Grade	Credit Hours	Quality Points	R
EDTC	5153	GR	Comp Based Instr Dev				A	3.000	12.000	
EDTC	5503	GR	Facilitating Online Learning				A	3.000	12.000	
LBSC	5823	GR	Adm Sch Lib Med & Tech				A	3.000	12.000	
				Attempt Hours	Passed Hours	Earned Hours	GPA Hours	Quality Points	GPA	
Current Term:				9.000	9.000	9.000	9.000	36.000	4.000	
Cumulative:				27.000	27.000	27.000	27.000	108.000	4.000	

Unofficial Transcript

Term: Summer 2019

Academic Standing: Good Standing

Subject	Course	Level	Title				Grade	Credit Hours	Quality Points	R
CIED	5353	GR	Lit for Child, Adole, Adult				A	3.000	12.000	
EDTC	5303	GR	Digital Games Sims In Class				A	3.000	12.000	
REMS	5013	GR	Res Design & Methodol				A	3.000	12.000	
				Attempt Hours	Passed Hours	Earned Hours	GPA Hours	Quality Points	GPA	
Current Term:				9.000	9.000	9.000	9.000	36.000	4.000	
Cumulative:				36.000	36.000	36.000	36.000	144.000	4.000	

Unofficial Transcript

Term: Fall 2019

Academic Standing: Good Standing

Subject	Course	Level	Title				Grade	Credit Hours	Quality Points	R
EDTC	5203	GR	Foundations of Educational Tec				A	3.000	12.000	

8/21/2020

Academic Transcript

EPSY	5463	GR	Psychology of Learning				A		3.000	12.000
				Attempt Hours	Passed Hours	Earned Hours	GPA Hours	Quality Points	GPA	
Current Term:				6.000	6.000	6.000	6.000	24.000	4.000	
Cumulative:				42.000	42.000	42.000	42.000	168.000	4.000	

Unofficial Transcript

Term: Summer 2020

Academic Standing: Good Standing

Subject	Course	Level	Title	Grade	Credit Hours	Quality Points	R	
CIED	5443	GR	Teaching Reading w/Lit	A	3.000	12.000		
			Attempt Hours	Passed Hours	Earned Hours	GPA Hours	Quality Points	GPA
Current Term:			3.000	3.000	3.000	3.000	12.000	4.000
Cumulative:			45.000	45.000	45.000	45.000	180.000	4.000

Unofficial Transcript

TRANSCRIPT TOTALS (GRADUATE) -Top-

	Attempt Hours	Passed Hours	Earned Hours	GPA Hours	Quality Points	GPA
Total Institution:	45.000	45.000	45.000	45.000	180.000	4.000
Total Transfer:	0.000	0.000	0.000	0.000	0.000	0.000
Overall:	45.000	45.000	45.000	45.000	180.000	4.000


Unofficial Transcript

COURSES IN PROGRESS -Top-

Term: Fall 2020

Subject	Course Level	Title	Credit Hours
LBSC	5113	GR	Selection and Organization of Informational and Educational Resources
			3.000

Worksheets

Data refreshed 8/13/2020 1:08 AM 

Name

Workman, Sheila E

Degree

Master of Science

Level Graduate

Classification Graduate Master

Major Library Media and Info Tech, MS

Program MS - Library Media/Info Tech

College Education

Previous Degrees Univ of Oklahoma Norman
Campus BA Unknown 15-DEC-00

Previous Degree BA

Advisors Alesha Baker (Primary)

NSU GPA (GR) 4.000

NSU Earned Hours (GR) 27

NSU GPA Hours (GR) 27

Overall GPA (GR) 4.000

Overall Earned Hours (GR) 27

Overall GPA Hours (GR) 27

Degree Progress (This is an estimation of
your degree progress, based on the
number of boxes checked below)



Overall GPA

4.000

Requirements

Audit date 8/6/2020 12:33 AM

Degree in Master of Science

IN-PROGRESS

Catalog Term: Spring 2019

✓
You meet the
minimum GPA
requirement.

①
Major
Requirements

Major in Library Media and Info Tech, MS

IN-PROGRESS

Credits required: 33 Credits applied: 33
Catalog Term: Spring 2019

NOTE: ANY 4,000 LEVEL COURSE TAKEN FOR
GRADUATE CREDITREQUIRES A SIGNED CONTRACT
PRIOR TO ENROLLING.
Your current major GPA is 4.000.

	Course Title	Grade	Credits	Term
✓ Program Admission Requirement	Graduate Program Admission	Y		
✓ File Degree Plan	Graduate Plan of Study	Y		
✓ MAT or GRE Exam is required.				
✓ MAT Passed	MATT Millers Analogy Test	414		
✓ PROFESSIONAL EDUCATION-3 Hours				
✓ Qualitative Research	EDUC 5103 EDUCATIONAL RESEARCH	A	3	Summer 2019
	Exception by: McCollum, Joshua L On: 09/03/2019 Substitute: EDUC 5103>EDUC 5143-Sim. courses-SCH			
① SPECIALIZED COURSES-22 Hours				

✓	Introduction to Librarianship	LIBM 5013	INTRODUCTION TO LIBRARIANSHIP	A	3	Spring 2019
✓	Advanced Materials for Children	LIBM 5023	ADV MATERIALS FOR CHILDREN	A	3	Spring 2019
✓	School Library Administration	LIBM 5123	ADV ADMN FOR LIBR MEDIA CENTER	A	3	Summer 2019
✓	Advanced Materials for Young Adults	LIBM 5313	ADV MATERIALS FOR YOUNG ADULTS	A	3	Fall 2019
✓	Collection Development & Mgmt of School Libraries	LIBM 5413	ACQ & ORG OF LIBRARY MATERIALS	A	3	Summer 2019
✓	Information Resources and Service	LIBM 5513	INFO & RESOURCES & SERVICES	A	3	Spring 2020
✓	School Library Leadership & Advocacy	LIBM 5523	SCHOOL LIB LEADER & ADVOCACY	A	3	Summer 2020
①	Professional Networking & Development	LIBM 5611	PROF NETWORKING & DEVELOPMENT	IP	(1)	Fall 2020
✓	Technology in STEM Education	EDUC 5823	TECHNOLOGY IN STEM EDUCATION	A	3	Summer 2020
①	Reading Enrichment	READ 5113	EMERGENT & EARLY LIT DEV	IP	(3)	Fall 2020
①	Practicum	LIBM 5902	PRACTICUM	IP	(2)	Fall 2020

General Electives and Other Credits

Credits applied: 0 Classes applied: 0

Noncourse	Score	Term

Candidacy Requirement	N
Graduate Candidacy	N
Program Admission Requirement	Y
Degree Plan Requirement	Y

Preregistered/Planned

Credits applied: 6 Classes applied: 3

Course	Title	Grade	Credits	Term
LIBM 5611	PROF NETWORKING & DEVELOPMENT	IP	(1)	Fall 2020
LIBM 5902	PRACTICUM	IP	(2)	Fall 2020
READ 5113	EMERGENT & EARLY LIT DEV	IP	(3)	Fall 2020

Exceptions

Type	Description	Created on	Created by	Block	Enforced
Substitute	EDUC 5103>EDUC 5143-Sim. courses-SCH	09/03/2019	McCollum, Joshua L	Major in Library Media and Info Tech, MS	Yes

Legend

Complete	Not complete	Complete except for classes in-progress	Nearly complete - see advisor	Prerequisite	Any course number
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Disclaimer

You are encouraged to use this degree audit report as a guide when planning your progress toward completion of the above requirements. Contact your

academic advisor for assistance in interpreting this report or regarding your official degree/certificate completion status. This audit is not your academic transcript and it is not official notification of completion of degree or certificate requirements. Please contact the Registrar's Office to obtain a copy of your official academic transcript.



TULSA PUBLIC SCHOOLS

EQUITY CHARACTER EXCELLENCE TEAM JOY

To: Oklahoma State Department of Education
From: Sheila Elaine Workman
Tulsa Public Schools
Date: September 25, 2020
RE: Library Waiver – Certification Intent

Dear Sir or Madam:

I am in process of obtaining my Library Media Specialist Certification through the library media specialist program at Northeastern State University in Broken Arrow. I intend to work at Burroughs Elementary under the library waiver offered by the Oklahoma State Department of Education (70 O.S. § 3-126). I understand that I will have three years to complete this program and be fully certified through the Oklahoma state Department of Education in Library Media Specialist in order to continue in a certified library position.

Best,

Sheila Elaine Workman

DESTINATION EXCELLENCE

3027 SOUTH NEW HAVEN AVENUE | TULSA, OKLAHOMA 74114

918.746.6800 | www.tulsaschools.org



Aug. 13, 2020

To Whom It May Concern,

I am writing this letter to confirm that Sheila Workman is enrolled in the Library Media and Information Technology Program at Northeastern State University. She began our program in the spring of 2019, and is currently enrolled for the fall 2020 semester with an anticipated graduation date of December 2020.

Our program prepares individuals to be effective school librarians in the areas of teaching and learning, information access, and program administration. We focus on theoretical and practical knowledge of schools, learners and best practices.

If you need any further details regarding our program or Shelia Workman, I would be willing to provide additional information. Please feel free to contact me at bakera@nsuok.edu or 918-779-5933.

Alesha Baker

Alesha Baker, Ph.D.
Assistant Professor, Department of Educational Leadership
Program Chair, Library Media & Information Technology
Northeastern State University
3100 E. New Orleans, BAED 160
Broken Arrow, OK 74014



TULSA PUBLIC SCHOOLS

EQUITY CHARACTER EXCELLENCE TEAM JOY

To: Oklahoma State Department of Education, Accreditation Division

From: Deborah A. Gist
Tulsa Public Schools

Date: August 27, 2020

RE: Library Statutory Waiver/Deregulation Application

Tulsa Public Schools is seeking a three-year School District Empowerment Program deregulation waiver to Standard VII concerning staffing of school library media centers: 70 O.S. § 3-126 - Library Media Specialist/waive certification only - teacher attending college/university to obtain Library Media Specialist certification. Originally granted on June 29, 1999, renewed in 2002, 2005 and 2008, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, and 2019 the waiver allows Tulsa Public Schools to continue the Intern LMS, Library Media Specialist Program, and "grow our own" librarians in a time of national and statewide shortages of certified Library Media Professionals.

Tulsa Public Schools strives to have fully certified librarians at every school. This waiver serves an important role in ensuring every student has access to quality library services every day in spite of the national shortage of school librarians. The certified applicant pool has remained low, and we have turned, once again, to certified classroom teachers and highly qualified graduate students to fill library positions as they continue working toward certification. The TPS library media intern program is a great success. Many of our current LMS have participated in the intern program and four have gone on to win the Polly Clarke Award for Outstanding Librarian for the State of Oklahoma. This program strategy has enabled us to meet our goal of providing every student the services of a highly qualified teacher librarian.

Therefore we respectfully seek a three-year School District Empowerment Program deregulation waiver of the Statutory Waiver Standard VII, 70 O.S. § 3-126 - Library Media Specialist/waive certification only - teacher attending college/university to obtain Library Media Specialist degree and certification. Thank you for your consideration of this waiver extension. We appreciate your continued support, and will be happy to discuss the request in detail.

Sincerely,

Deborah Gist, Ed. D.
Superintendent

DESTINATION EXCELLENCE

3027 SOUTH NEW HAVEN AVENUE | TULSA, OKLAHOMA 74114
918.746.6800 | www.tulsaschools.org