

RYAN WALTERS STATE SUPERINTENDENT of Public Instruction Oklahoma State Department of Education

MEMORANDUM

TO:

The Honorable Members of the State Board of Education

FROM:

Ryan Walters

DATE:

May 23, 2024

SUBJECT: Statutory Waiver Concerning Cooperative Agreements for Alternative Education

The following schools are requesting a statutory waiver of 70 O.S. 1210.568, which requires them to enter into a cooperative agreement with another school district if enrollment in their alternative education program is less than ten (10) students for the 2023-2024 school year. Approval is recommended.

County	District	Waiver Year (Total)	
	3 Years		
Creek	Olive	3 of 3	
Pittsburg	Haywood	2 of 2	
Pittsburg	Tannehill	2 of 2	
Pushmataha	Albion	2 of 2	

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

BM/ab

Attachments

210:35-5-71. STAFFING.

The school shall provide staffing for the media program through one of the following arrangements:

(1) OPTION A

(1) OPTION A.	
ENROLLMENT	QUALIFIED SPECIALIST REQUIRED At least a half-time certified library media specialist (librarian)
Fewer than 300	
300 to 499	At least one full-time certified library media specialist (librarian) or a half-time certified library media specialist (librarian) and a full-time library assistant.
500-999	At least one full-time certified library media specialist (librarian) and a half-time library assistant

(2) OPTION B.

ENROLLMENT	QUALIFIED SPECIALIST REQUIRED
Fewer than 300	At least one-fifth time certified library media specialist (librarian) and a full-time library assistant.
300 to 499	At least a half-time certified library media specialist (librarian) and a full-time library assistant.
500 + · · ·	At least one full-time certified library media specialist (librarian)

and a half-time library assistant.

ADDITIONAL STANDARDS FOR MIDDLE LEVEL SCHOOLS

210:35-7-61. Staffing
The school shall provide staffing for the media program through one of the following arrangements:

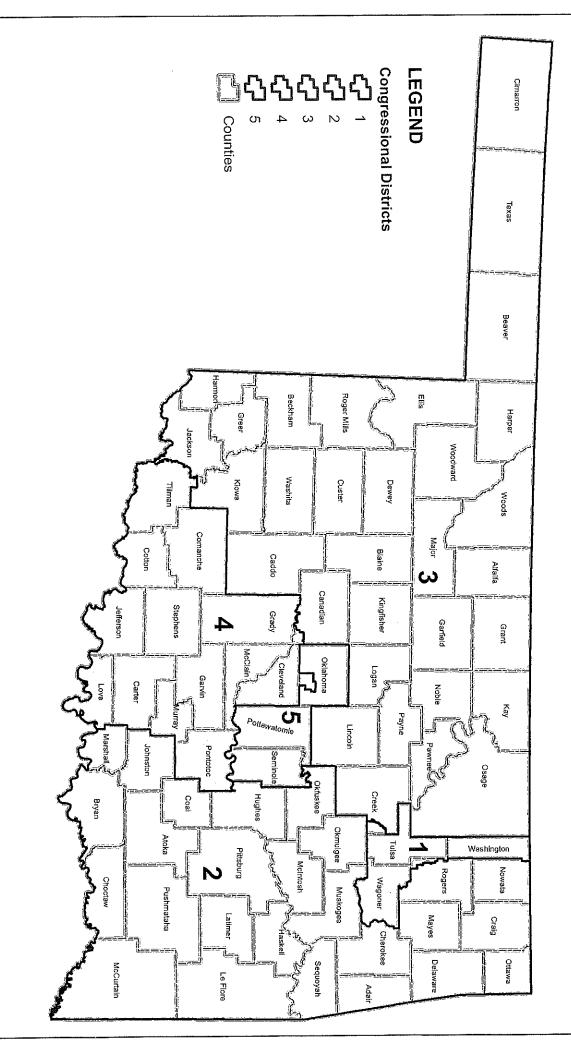
ENROLLMENT	QUALIFIED SPECIALISTS REQUIRED
Fewer than 300 300 to 499	At least a half-time certified library media specialist (librarian) At least one full-time certified library media specialist (librarian) or a halftime library media specialist (librarian) and a full-time library assistant
500 to 999	At least one full-time certified library media specialist (librarian) and a halftime assistant
1000 to 1499	At least one full-time certified library media specialist (librarian) and one full-time library assistant
1500 plus	At least two full-time certified library media specialists (librarians) (92)

210:3549-71. Staffing.

The school shall provide staffing for the library media program through one of the following arrangements:

ENROLLMENT Fewer than 300.	QUALIFIED SPECIALISTS REQUIRED At least a half-time certified library media specialist (librarian).
300 to 499	At least one full-time certified library media specialist (librarian) or a half-time library media specialist (librarian) and a full-time library assistant.
500-999	At least one full-time certified library media specialist (librarian) and a half-time library assistant.
1000 to 1499.	At least one full-time certified library media specialist (librarian) and one full-time library assistant.
1500 plus	At least two full-time certified library media specialists (librarian)

Oklahoma Congressional Districts Elections



Oklahoma House of Representatives, GIS Office

25

50

100 Miles

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION for 20 23 - 20 24 school year

Creek	Olive Public Schoo	is
COUNTY	SCHOOL DISTRICT	
9352 S 436th W Ave	Drumright	74030
SCHOOL DISTRICT MAILING ADDRESS	CITY	ZIP ÇODE
N		
Olive Academy (Alt Ed)		
NAME OF SITE		
Much	8-1-23	
PRINCIPAL SIGNATURE*	DATE	
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		THE WAIVER/DEREGUALTION
PRINCIPAL SIGNATURE*	DATE	IS REQUESTED FOR:
PRINCIPAL SIGNATURE*	DATE	One Year Only
I Middle Vic aloua diagram		
Rennie Nickell	· .	Three Years*
SUPERINTENDENT NAME (PLEASE PRINT)		*Please see instruction page for additional
		requirements for a three year request
rnickell@olive.k12.ok.us	La la la	
SUPERINTENDENT E-MAIL ADDRESS		
	8-9-23	
SUPERINTENDENT SIGNATURE*	DATE	SDE USE ONLY
		PROJECT YEARS
		3 of 3
I hereby certify that/this waiver/deregulation a		
local board of education at the meeting on	, 20	ENROLLMENT
		High School
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BOARD PRESIDENT SIGNATURE*	4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Jr./Middle High
NOTARY SEAL ->		Elementary
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Nichalla Callentha	8/14/23	District Total
NOTARY	DATE	RECEIVED MAY 0 8 2024
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1/31/20		100 87
COMMISSION EXPIRATION DATE		70 O.S. / 240 . 768
Statute/Oklahoma Administrative Code to	be Waived:	OAC
(specify statute or OAC (deregulation) number		0 0 0
	•	Loop Hareement
*Original signatures are required. The attached question	nnaire must be answered to process.**	NAME OF WAIVER

A. Reason for the Waiver request. Please include distance from your alternative education site to the closest possible district to coop with, what alternative means will have to be employed if your waiver was to be denied, and what percentage of your student population will benefit from the waiver if approved.

Olive Schools currently has less than 10 students enrolled for the Alternative Education program, but previous years enrollment was at least 13 students. This is the first year for less than 10.

The closest district with an alternative education program is about twenty miles from our school. If the waiver is denied, the district will have to coodinate with the receiving school, parent/student and create a plan for meeting the student needs and transportation.

If approved, the waiver would benefit anywhere from 5-10% of the student population population.

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, graduation rate if a waiver has been awarded prior to this year, and learning achievement.

If the waiver is not approved, ideally the coop would meet at our school site. The primary educational benefit for our students enrolled in our Alternative Education program is that they are working with an instructor in which they have already developed a relationship. We provide opportunities for Art, Agriculture Education and Athletics. The current students enrolled in the program have come from other schools and will not participate in an Alt Ed program if they are required to bus to another location. Most will be lost to an online educational program without in person resources.

C. Have you participated in an alternative education coop previously? Have you been awarded this waiver before and what was the educational impact to the district: Results of the Statutory Waiver, i.e., effect on student performance levels, impact of plan on other sites in the district.

To my knowledge, Olive Schools has not participated in an alternative education coop previously. This is the first year that we have less than 10 students enrolled in the program.

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)
Assessments are all taken through the online program, Edgenuity.

E. Any financial impact to the District (positive or negative) for the proposed waiver/deregulation? If positive please describe where the available would be reallocated. If the waiver is approved our students will maintain their enrollment through Olive Public Schools. This will help our school financially because if these students have to attend school in another town we may very well lose their siblings to another school district or online school.

F. Describe method of assessment or evaluation of effectiveness of the plan both for staff and students, I.E., TLE, ACT scores, graduation rates, RSA, School Report Card, etc. TLE, ACT Scores, graduation rates, and student surveys are all methods of assessment used to evaluate the effectiveness of both staff and students.

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



OLIVE PUBLIC SCHOOL

9352 S 436 W AVE DRUMRIGHT, OK 74030 (918)-352-9568 www.olive.k12.ok.us

Olive Public Schools' Alternative Education program runs from 8:00 am to 12:30 pm.

Olive Public Schools

2023-2024 School Calendar

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School Closed/ Holidays



Teacher in-Service Day (no school for students)



Snow Day



Parent Teacher Conferences 4:00-7:00pm



First and Last Day of Class 80 + 3 in-service



Institute Day 79 + 2 in-service



OLIVE PUBLIC SCHOOL

9352 S 436 W AVE DRUMRIGHT, OK 74030 (918)-352-9568 www.olive.k12.ok.us

Olive Public School is requesting permission to serve less than 10 students in our Alternative Education Program.

X Nichell 4-25-24

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION for 20 23 - 20 24 school year

PITTSBURG	HAYWOOD	
COUNTY	SCHOOL DISTRICT	
11461 W ST HWY 31	McALESTER	74501
SCHOOL DISTRICT MAILING ADDRESS	CITY	ZIP CODE
HAYWOOD ELEMENTARY SCHOOL		
NAME OF SITE		
the the	4/23/2024	
PRINCIPAL SIGNATURE*	DATE	
PRINCIPAL SIGNATURE*	DATE	THE WAIVER/DEREGUALTION IS REQUESTED FOR:
PRINCIPAL SIGNATURE*	DATE	One Year Only
PHILLIP RATTAN		Three Years*
SUPERINTENDENT NAME (PLEASE PRINT)		*Please see instruction page for additional requirements for a three year request
PRATTAN@HAYWOOD.K12.OK.US		requiements to a unice your request
SUPERINTENDENT E-MAIL ADDRESS		
Will of the	4/23/2024	
SUPERIN ENDENT SIGNATURE*	DATE	SDE USE ONLY
		PROJECT YEARS
I hereby certify that this waiver/deregulation ap	•	
local board of education at the meeting on se	ptember 12 , 20 <u>23</u>	ENROLLMENT
floth fall		High School
BOARD PRESIDENT SIGNATURE*		Jr./Middle High
NOTARY SEAL →		Elementary
NOTAN ON THE WORK OF THE PARTY	4/23/2024	District Total
NOTARY	DATE	RECEIVED MAY 0 1 2024
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Statute/Oklahoma Administrative Code to b	ne Waived: 70 OS 1210.568	OAC
(specify statute or OAC (deregulation) number	: (see instructions)	Coop Aarrena A
*Original signatures are required. The attached question	naire must be answered to process,**	NAME OF WAIVER

A. Reason for the Waiver request. Please include distance from your alternative education site to the closest possible district to coop with, what alternative means will have to be employed if your waiver was to be denied, and what percentage of your student population will benefit from the waiver if approved.

THE CLOSEST DISTRICT IS McALESTER, 20 MILES AWAY.

HAYWOOD HAS AN ENROLLMENT OF 120 STUDENTS IN GRADES PK-8 AND ONE TEACHER PER GRADE GIVING US AN AVERAGE CLASS SIZE OF 12. OUR SMALL CLASS SIZES ALLOWS FOR INDIVIDUAL ATTENTION FOR EVERY STUDENT AND GREATLY REDUCES DISRUPTIONS.

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, graduation rate if a waiver has been awarded prior to this year, and learning achievement.

HAYWOOD HAS NEVER PARTICIPATED IN THE ALT-ED PROGRAM. AS A RURAL, ISOLATED, SMALL ELEMENTARY SCHOOL WE HAVE MANAGED TO MEET THE NEEDS OF ALL STUDENTS. HAYWOOD WAS ONE OF TWO SCHOOLS IN PITTSBURG COUNTY SERVING 7TH AND 8TH GRADE STUDENTS TO EARN A B ON LAST YEARS REPORT CARD.

C. Have you participated in an alternative education coop previously? Have you been awarded this waiver before and what was the educational impact to the district: Results of the Statutory Waiver, i.e., effect on student performance levels, impact of plan on other sites in the district. HAYWOOD HAS NEVER PARTICIPATED IN A CO-OP.

HAYWOOD HAS MAITANED A "B" ON THE STATE REPORT CARD FOR THE PAST EIGHT YEARS.

D.	Timeline: Please submit class schedule, calendars, assessment forms and other attachments as necessary.
Ε.	Any financial impact to the District (positive or negative) for the proposed waiver/deregulation? If positive please describe where the available would be reallocated.
	NO FINANCIAL IMPACT TO THE DISTRICT IS FORSEEN.
F.	Describe method of assessment or evaluation of effectiveness of the plan both for staff and students, I.E., TLE, ACT scores, graduation rates, RSA, School Report Card, etc.
	STUDENT GRADUATION RATES, GRADES, STATE TEST SCORES AND SCHOOL REPORT CARD GRADES WILL ALL BE USED TO MONITOR AND MEASURE STUDENT SUCCESS.
	MENORE STODENT GOODEGO.
' You	will be contacted if more information is needed to process this request,

Haywood Public School

11461 West State Highway 31 McAlester, OK 74501

April 23, 2024

To Whom It May Concern:

Haywood Elementary school requests a three year statutory waiver from participation in Alt-Ed program. Specifically we are asking for:

Statutory Waiver 70 O.S. 1210.568 COOP Agreement and Deregulation OAC 210:35-29-2 Abbreviated Day Alternative Education

Haywood has never participated in the Alternative Education Program or taken Alternative Education funding. With an enrollment of only 120 students in grades pk-8 we have successfully met our students educational needs.

Sincerely,

Bud Rattan

Superintendent, HPS

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION for 20 23 - 20 24 school year

Pittsburg	Tannehill	
COUNTY	SCHOOL DISTRICT	
9283 Tannehill Rd	McAlester	74501
SCHOOL DISTRICT MAILING ADDRESS	CITY	ZIP CODE
Tannehill Schools		
NAME OF SITE	7 4	
frutten tract	8/21/23	
PRINCIPAL SIGNATURE*	DATE	
PRINCIPAL SIGNATURE*	DATE	THE WAIVER/DEREGUALTION IS REQUESTED FOR:
PRINCIPAL SIGNATURE*	DATE	One Year Only
Jonathan Booth		Three Years*
SUPERINTENDENT NAME (PLEASE PRINT)		*Please see instruction page for additional
jbooth@tannehill.k12.ok.us		requirements for a three year request
SUPERINTENDENT E-MAIL ADDRESS		
Linten Both	8/21/23	
SUPERINTENDENT SIGNATURE*	DATE	SDE USE ONLY
•		PROJECT YEARS
I hereby certify that this waiver/deregulation a		L of L
local board of education at the meeting on A	ugust 22nd , 20 <u>23</u>	ENROLLMENT
David D Puerod &	HA WALL	High School
BOARD PRESIDENT SIGNATURE*	FOX CHE	Jr./Middle High
	OTARY **	Elementary
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COMMISSION EXPIRATION DATE		70 0.5. 1210. 568
Statute/Oklahoma Administrative Code to	be Waived;	OAC
(specify statute or OAC (deregulation) number	r: (see instructions)	Coop Agreement
*Original signatures are required. The attached question	nnaire must be answered to moncess **	NAME OF WAIVED

A.	Reason for the Waiver request. Please include distance from your alternative education site to the closest possible district to coop with, what alternative means will have to be employed if your waiver was to be denied, and what percentage of your student population will benefit from the waiver if approved. We do not have anyone in the program and havent for the past 5 year period
В.	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, graduation rate if a waiver has been awarded prior to this year, and learning achievement. We will serve anyone as they enter the program
C.	Have you participated in an alternative education coop previously? Have you been awarded this waiver before and what was the educational impact to the district: Results of the Statutory Waiver, i.e., effect on student performance levels, impact of plan on other sites in the district. we were approved for the waiver last year due to non-enrollment. No students

were impactes, because we had none in the program, nor asked to apply into

the program.

Tannehill Public Schools

9283 Tannehill Rd. McAlester, OK 74501 (918)423-6393 Superintendent of Schools - Jonathan Booth

April 22nd, 2024

Tannehill Public Schools requests a cooperative agreement for Alternative Education Services for the 2023-24 School year because we have less than 10 students.

Thank You

Jonathan Booth Superintendent Tannehill School

SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION for 20 23 - 20 26 school year

Pushmataha	Albion Public Sc	hool
COUNTY	SCHOOL DISTRICT	
P.O. Box 100	Albion	74521
SCHOOL DISTRICT MAILING ADDRESS	CITY	ZIP CODE
o I Allian Dula	li - Cabaai	
Albion elementary School; Albion Pub	IIC SCHOOL	
TANIAL OF SITE	4/00/04	
	4/23/24	
PRINCIPAL SIGNATURE*	DATE	
PRINCIPAL SIGNATURE*	DATE	THE WAIVER/DEREGUALTION IS REQUESTED FOR:
PRINCIPAL SIGNATURE*	DATE	One Year Only
Katie Blagg		Three Years*
SUPERINTENDENT NAME (PLEASE PRINT)		*Please see instruction page for additional
		requirements for a three year request
kblagg@albion.k12.ok.us SUPERINTENDENT E-MAIL ADDRESS		
SUPERIN ENDENT E-MAIL ADDRESS		
Titre Blug	4/23/24	SDE USE ONLY
SUPERINTENDENT SIGNATURE*	DATE	
		PROJECT YEARS
I hereby certify that this waiver/deregulation	application was approved by o	ur
local board of education at the meeting on_	May 24 , 20 <u>23</u>	ENROLLMENT
X Much L bost		High School
BOARD PRESIDENT SIGNATURE	4.	Jr./Middle High
NOTARY SEAL →		Elementary
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Statute/Oklahoma Administrative Code to	be Waived:	OAC
(specify statute or OAC (deregulation) numb	er: (see instructions)	0 (01
*Original signatures are required. The attached questi	ionnaire must be answered to process	** NAME OF WAIVER
"Offginal signatures are required, the attached dueso	annian a maar be andiren present	. 1

- A. Reason for the Waiver request. Please include distance from your alternative education site to the closest possible district to coop with, what alternative means will have to be employed if your waiver was to be denied, and what percentage of your student population will benefit from the waiver if approved.
 - The distance from our site to the nearest Alternative education site is in excess of 50 miles. No alertative means will need employed as we have no students in need of services.

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, graduation rate if a waiver has been awarded prior to this year, and learning achievement. We use quality programs for supplimenting student leaning such as Exact Path, IXL, Rennaisaince, etc, and students can be directed to implement makeup work as needed.

C. Have you participated in an alternative education coop previously? Have you been awarded this waiver before and what was the educational impact to the district: Results of the Statutory Waiver, i.e., effect on student performance levels, impact of plan on other sites in the district. It was not required for Elemetary students previously. We have been given a stautory waiver in the past.

D.	Timeline: Please submit class schedule, calendars, assessment forms and other attachments as necessary. Not applicable. We do not have classes for high School credit at the Elementary Level.
E.	Any financial impact to the District (positive or negative) for the proposed waiver/deregulation? If positive please describe where the available would be reallocated. None. No funds are received.
F.	Describe method of assessment or evaluation of effectiveness of the plan both for staff and students, I.E., TLE, ACT scores, graduation rates, RSA, School Report Card, etc. We can use STAR testing, Exact Path, IXL and others for assessment.
** You	ı will be contacted if more information is needed to process this request.

Albion Public Schools

Katie Blagg, Superintendent 64 CO-O2





P.O. Box 100 206 South Texas Avenue Albion, Oklahoma 74521-0150 Phone: (918) 839-9920

Phone: 918-563-4331 FAX: 918-563-4330

April 23, 2024 Dear April Barr: Oklahoma State Department of Education,

Please accept this Albion Public School Alternative School Deregulation Application. This Application is for 2023-2026 School Years.

Thank you so much for your help in this matter.

Sincerely,

Katie Blagg