



# Request for Waiver Other

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School District/Collaborative	Proposed Effective Date

The above school district seeks a waiver from the following state regulation:

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Please respond briefly to each of the following selections: (Attach additional information as needed.)

**1. RATIONALE:**

Explain what you want to do and how a waiver will help you achieve measurable goals. Include how the waiver's overall intent fits into school and district improvement plans.

**2. CONSTITUENCY SUPPORT:**

Describe the processes used to build constituency support for this waiver, and how this support will be maintained.

**3. IMPACT:**

Explain how the specific population and all other students will be affected by a granted waiver.

**4. ASSESSMENT:**

Explain how you will monitor annually the effectiveness of the waiver on the improvement of student learning. Describe the major indicators of student learning and educational performance that will be used.