

Division of NCLB Program Coordination
Initial Application for Ed-Flex Schoolwide Eligibility Waiver
School Year 2013-2014

Co-Dist No. _____

IF SSA member, add LEA Name and Co-Dist No. _____

Waiver Number: _____
[Assigned by TEA]

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Supplement to SAS # NCLBAA14—Schedule WV4004—Ed-Flex—Title I, Part A Schoolwide Eligibility

Instructions: This waiver may **ONLY** be initiated through the **ORIGINAL** NCLB Consolidated Application for Federal Funding in eGrants. This supplemental form is to submit the additional information and the required signatures to complete the campus's request for a waiver of the 40 percent campus poverty threshold requirement for Title I, Part A Schoolwide eligibility. This waiver is only available if the campus has completed its required Schoolwide planning and the campus did **NOT** participate in a Schoolwide program in 2012-2013. The LEA must complete a separate Supplement to WV4004 Form for each campus requesting this waiver.

DO NOT SUBMIT this form until requested to do so by the TEA staff person who is negotiating the LEA's NCLB Consolidated Application for Federal Funding in eGrants (SAS # NCLBAA14).

Name of Campus _____ **Campus Number:** _____

Part 1: Waiver History

- A. How many months did the campus spend planning and aligning the ten components of the Title I, Part A Schoolwide program with the Campus Improvement Plan?

Number of Months

- B. On what date was the Schoolwide Planning completed? (This date must be prior to the stamp-in date of the original application.)

Month/Day/Year

- C. Certification

I certify that this campus has completed its Schoolwide campus planning and that the ten components have been clearly incorporated in a meaningful way into the Campus Improvement Plan.

Typed Name of Technical Assistance Provider

LEA ESC Other _____

Signature of Provider

Date _____

This waiver is granted upon the approval of this SAS for as long as the campus remains Title I, Part A eligible. Should the campus reach the 40 percent poverty threshold, the campus will no longer be considered an Ed-Flex Schoolwide campus for reporting purposes.

For TEA Use Only
Adjustments confirmed with _____ on _____ by _____ of TEA.

Part 2: Public Comment

The following strategies were used by the LEA to publicize the request for this waiver and to receive comments.

- Newspaper
- LEA/Campus Newsletters
- LEA/Campus Website
- School Board Meeting

Other (Specify) _____

Part 3: Local Approval

Explain why the Campus Site-Based Decision-Making (SBDM) Committee supports this waiver:

Part 4: Certification

The signatures below certify that the required Schoolwide planning process has been completed prior to the submission of this waiver application. In addition, the undersigned clearly understand and agree that if the evaluation criteria as stated in the instruction document are not met, the **waiver will be terminated, and the campus will be ineligible to reapply for this waiver under the state’s current Ed-Flex authority.**

Signature of Teacher on Campus SBDM Committee: _____ **Date Signed:** _____

Signature of Parent on Campus SBDM Committee: _____ **Date Signed:** _____

Signature of Chairperson of Campus SBDM Committee: _____ **Date Signed:** _____

Signature of Campus Principal: _____ **Date Signed:** _____

Signature of Superintendent: _____ **Date Signed:** _____

Date of Approval by LEA Board of Trustees: _____

For TEA Use Only

Adjustments confirmed with _____ on _____ by _____ of TEA.