**Federal Program Compliance Division**

**Application for Individual Ed-Flex Programmatic Waiver**

**Indicate Applicable School Years:**[ ]  **2020-2021** [ ]  **2021-2022** [ ]  **2022-2023** [ ]  **2023-2024**

**Waiver Number (Assigned by TEA):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This application is for individual programmatic waivers only. For definitions of the different types of waivers, refer to the [Overview of Ed-Flex and Types of Waivers Available](https://tea.texas.gov/sites/default/files/EDFLEXwaivertypes.pdf) section posted along with this application. This data collection is authorized by the Every Student Succeeds Act, Section 9207(a)(4), and by the Texas Education Code, 7.056(g). These data are being gathered with the purpose of granting waivers of federal law or regulation and associated state law or rule.

**Application Instructions and Information**

Submit the completed waiver application via email to ESSASupport@tea.texas.gov**.** TEA will accept Individual Programmatic Waiver applications on an ongoing basis. Completed applications will be reviewed at Ed-Flex Committee meetings, according to the schedule posted on TEA’s [Ed-Flex web page](https://tea.texas.gov/finance-and-grants/grants/essa-program/ed-flex-waivers). Questions concerning Ed-Flex waivers should be directed to ESSASupport@tea.texas.gov.

**1. Applicant Information**

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| --- |
| LEA Name:       County-District #:       ESC Region #       |
| Primary Contact:      Email:       Phone:       |
| Superintendent Name:       Phone:       |

**2. Individual Programmatic Waiver Information**

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| --- |
| Statutory provision to be waived:       |
| Applicability: Districtwide or  Campus-specific  |

|  |  |
| --- | --- |
| Campus Name (if applicable):      | Campus Number:       |

|  |
| --- |
| Indicate which programs are affected by this waiver request:[ ]  Title I, Part A [ ]  Title I, Part C [ ]  Title I, Part D [ ]  Title II, Part A[ ]  Title IV, Part A, Subpart 1 [ ]  Carl D. Perkins Career and Technical Education Act of 1966, as amended |

**3. Public Comment**

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| --- |
| How did the LEA publicize this request for this waiver and receive comments? Check all that apply:[ ]  Newspaper [ ]  Press release [ ]  LEA/campus newsletters [ ]  LEA/campus website[ ]  School board meeting [ ]  Social Media [ ]  Other (specify)       |

**4. Waiver Description**

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| --- |
| Describe the statutory provision to be waived:      |

**4. Waiver Description** (continued)

|  |
| --- |
| What state law or rule must be waived in conjunction with this provision? If none, enter N/A.      |
| If this waiver is granted, what will be done that is **different** from what is currently required under law or regulation?      |
| What are the LEA’s/campus’s measurable educational goals for improving student performance in each of the years the waiver would be in effect?      |
| How would this waiver assist the LEA/campus in reaching those educational goals?      |

**5. Evaluation Requirements**

Ed-Flex offers the opportunity for additional flexibility in exchange for additional accountability. Each Ed-Flex waiver that is granted must be evaluated based on strict evaluation criteria. The Texas Ed-Flex Committee will establish the evaluation criteria appropriate to each type of Individual Programmatic Waiver requested. The criteria will be detailed in the waiver approval letter.

**6. Assessment of Previous Waiver**

If an LEA is applying to renew an expired Individual Programmatic Waiver, the LEA **must** provide data to demonstrate that the evaluation criteria as described in the LEA’s waiver approval letter have been met. Attach additional pages as necessary. This part is NOT APPLICABLE to those LEAs that did not have a waiver in the previous year.

**7. Certification**

The effectiveness of the waiver will be evaluated based on criteria to be determined by the Texas Ed-Flex Committee. The signatures below indicate the LEA’s understanding that if the evaluation criteria established by the Texas Ed-Flex Committee are not met at the end of the period for which the waiver is approved, the LEA/campus is not eligible to reapply for this same waiver under the state’s current Ed-Flex waiver authority.

For districtwide waivers, the Site-based Decision-making Committee (SBDM) is the LEA’s. For campus-specific waivers, the SBDM Committee is the campus’s.

**SBDM Committee Members** (Required for all applications)

|  |  |  |
| --- | --- | --- |
| Teacher Name:      | Signature       | Date       |
| Parent Name:       | Signature       | Date       |
| Chairperson Name:       | Signature       | Date       |

**Campus Principal** (Required for campus-specific waiver applications only)

|  |  |  |
| --- | --- | --- |
| Principal Name:       | Signature       | Date       |

**Superintendent** (Required for all applications)

|  |  |  |
| --- | --- | --- |
| Superintendent Name:       | Signature       | Date       |

**LEA Board of Trustees Approval** (Required for all applications): Date of Approval