

# ELEMENTARY CLASS SIZE WAIVER REQUEST FORM

- Variances will be corrected within two weeks of their occurrence.
- To remedy the variance, you must do one of the following:
  1. Place new students such that the variance no longer exists;
  2. Reassign current students, or
  3. Request a wavier. Upon completion of the “Waiver Request Form”, please submit copies to Human Resources.

- After formal review of the request, you will receive a copy of the Waiver Request Form indicating whether the waive has been granted or denied.

BUILDING	PRINCIPAL	DATE

- Please complete the following:
  1. Date variance occurred: \_\_\_\_\_
  2. Affected grades: \_\_\_\_\_

ALL AFFECTED GRADE LEVEL TEACHER NAMES	ALL AFFECTED GRADE LEVEL TEACHER NAMES

3. Have new students been placed in smallest classroom at this grade level?

YES

NO

If no, please explain:

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4. Student count in affected grade level (includes mainstreamed special education students) on: \_\_\_\_\_

Date

TEACHER NAME	NUMBER OF STUDENTS	TEACHER NAME	NUMBER OF STUDENTS

5. Do you expect additional special education students to be added to this grade level?

YES  If yes, explain how many and which classrooms:

NO

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**6. Narrative (additional comments, if necessary)**

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Principal Signature: \_\_\_\_\_ KEA AR \_\_\_\_\_

KEA AR \_\_\_\_\_

**\*If more than one building AR, all must sign.**

**I agree to the request for waiver:**

ALL AFFECTED GRADE LEVEL TEACHERS' SIGNATURES	YES	NO
1.		
2.		
3.		
4.		
5.		
6.		
PRINCIPAL'S SIGNATURE	YES	NO

**REQUEST: GRANTED  DENIED  DATE:**

**\*If request for waiver is denied, please see options 1 and 2 on the first page for next steps.**

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**Sheila Dorsey-Smith**  
 Assistant Superintendent of Human Resources

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**Heather Reid**  
 K.E.A President