



JOY HOFMEISTER  
STATE SUPERINTENDENT *of* PUBLIC INSTRUCTION  
OKLAHOMA STATE DEPARTMENT *of* EDUCATION

**MEMORANDUM**

**TO:** The Honorable Members of the State Board of Education  
**FROM:** Joy Hofmeister  
**DATE:** September 22, 2022  
**SUBJECT:** Deregulation for an Abbreviated School Day for Alternative Education

The following school is requesting deregulation from OAC 210:35-29-2 for the 2022-2023 school year in order to have an Abbreviated School Day for Alternative Education. Approval is recommended.

| County    | District            | Alternative Means  | Requested Years |
|-----------|---------------------|--|-----------------|
| Cleveland | Little Axe          | Instructional day will be 4 hours and 30 minutes a day, 4 days a week. | 3 of 3          |
| Oklahoma  | Choctaw-Nicoma Park | Instructional day will be 5 hours and 25 minutes a day, 4 days a week. | 1 of 1          |
| Oklahoma  | Harrah              | Instructional day will be 4 hours and 15 minutes a day, 4 days a week. | 1 of 1          |
|           |                     | <b>3 Years</b>   |                 |
| Okmulgee  | Beggs               | Instructional day will be 4 hours and 15 minutes a day, 4 days a week. | 1 of 1          |

\* The number in the County category represents the Congressional District.  
See the attached map.

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Attachments

## ALTERNATIVE EDUCATION ACADEMIES AND PROGRAMS

### 210:35-29-2. Definitions

The following words and terms, when used in this Subchapter, shall have the following meaning, unless the context clearly indicates otherwise.

"Alternative Education" means an educational process incorporating appropriate structure, curriculum, interaction, and reinforcement strategies to stimulate learning with students who have not utilized their capacity to do so within traditional educational settings.

"Abbreviated school day" means, for purposes of an alternative education program approved by the State Board of Education, a school day which consists of not less than four (4) hours and 12 minutes per day devoted to school activities for the locally approved 180-day school calendar.

# 2010-2011 Standards for Accreditation of Oklahoma Schools

## STANDARD III

### ADMINISTRATION AND ORGANIZATION

#### 210:35-3-41. Statement of the standard

The school is organized to ensure the achievement of its goals. The working relationships among the local board, superintendent, principal, and staff are such as to facilitate the successful functioning of all phases of the school's program. The principal of the school has the autonomy and authority to provide the leadership needed to accomplish the goals of the school. The school is provided with sufficient professional and service personnel to ensure effective operation of all phases of the school's program. The school is organized in a manner that encourages new and innovative ideas designed to improve the program and to help the school adapt to changing conditions. (92)

#### 210:35-3-46. Administrative and supervisory services

- (a) The school site shall be part of a system employing a full-time superintendent. *No board of a school district having average daily membership (ADM) of fewer than 500 students shall be prohibited from allowing a superintendent with the appropriate certificate to serve simultaneously as a principal. [70 O.S. § 5-106]* If a vacancy occurs in the superintendency during the course of the school year, a certified replacement must be employed within 45 school days.
- (b) It shall further be the responsibility of the local board, upon the recommendation of the superintendent, to employ an administrative head to be known as a principal for each of the schools within the district. Private schools shall employ a full-time principal/headmaster. An elementary district shall employ a full-time elementary superintendent. With the exception of requirements for certification, the term superintendent as used in these standards shall mean an elementary school superintendent, headmaster, or superintendent. Full-time is defined as employed full time, and therefore allows these administrators to teach.
- (c) Instructional leadership shall be the chief function of the school's principal. The principal shall be responsible for the improvement of instruction and be given the authority and resources needed to accomplish this goal. The principal shall help clarify the goals of the school, help obtain resources for it, coordinate its various activities, and promote its continuous evaluation to determine improvements needed.
- (d) Lines of administrative and supervisory authority between the central office staff and the principal shall be defined clearly and shall give the principal responsibility for initiating appropriate changes to meet the needs of the students.
- (e) The principal shall be involved in the selection, assessment, evaluation, retention, and promotion of all personnel assigned to the school.
  - (1) *All certified administrative personnel designated by a local board to conduct evaluations shall be required to participate in training conducted by the State Department of Education prior to evaluating. [70 O.S. § 6-101.10]*
  - (2) *No teacher shall be dismissed during the term of a contract or refused reemployment except at an official meeting of the board of education. The reemployment or*

## 2010-2011 Standards for Accreditation of Oklahoma Schools

*dismissal of teachers shall be in accordance with the school laws of Oklahoma. [70 O.S. § 6-101.20 through 101.30]*

- (f) While working with faculty, staff, or students in the school, central office and other supplementary personnel shall coordinate their activities through the principal.
- (g) The principal shall have the responsibility and the authority for the administration of the non-instructional programs in the school.
- (h) The local board shall adopt a school calendar and school day consistent with statutory requirements in Oklahoma.
  - (1) *The standard school year shall consist of not less than 180 days; or,*
  - (2) *For not less than one thousand eighty (1080) hours each school year, if a district board of education adopts a school-hours policy and notifies the State Board of Education prior to September 15 of the applicable school year.*
  - (3) *Not more than thirty (30) hours each school year may be used for attendance of professional meetings and teachers may be paid for a length of term in excess thereof, under conditions hereinafter outlined. Subject to district board of education policy or collective bargaining agreement, additional professional leave days may be granted for individual teachers to attend or participate in professional meetings, staff development training, or National Board certification portfolio development as provided for in Section 6-204.2 of this title. [70 O.S. § 1-109]*
  - (4) *The standard school day shall consist of not less than 6 hours devoted to school activities, exclusive of lunch, with the exception of nursery, early childhood education kindergarten, and alternative education. [70 O.S. § 1-111]*
  - (5) *The early childhood school day shall consist of not less than two and one-half hours per session.*
  - (6) *The kindergarten school day shall consist of not less than two and one-half hours per day. The requirement to attend kindergarten may be satisfied by attendance in either a half-day or full-day program. Membership in a kindergarten for either two and one-half (2 1/2) hours or six (6) hours per school day shall be counted as one (1) day for average daily membership purposes. Beginning with the 2011-2012 school year, it shall be the duty of every school district in this state to provide and offer a full six-hour day of kindergarten free of tuition for every child residing in the district who attains the age of five (5) years on or before the first day of September during the school year kindergarten is offered, provided that this duty may be satisfied by intra-district transfer to a school offering full-day kindergarten, by transferring kindergarten children to other school districts which will accept them and can provide kindergarten for such children, or by contracting for classroom space with a licensed public or licensed private child care provider based on the selection criteria established by the district. [70 O.S. § 18-108]*
  - (7) *A school district board of education may adopt and implement an extended day schedule for grades nine through twelve. All of the following conditions must be met:*
    - (A) *The annual number of hours of instruction must equal or exceed 1,080 hours which is equivalent to 180 days of instruction.*
    - (B) *Only one day per week shall consist of not less than five hours of academic instruction in a regular classroom setting.*

## 2010-2011 Standards for Accreditation of Oklahoma Schools

- (C) The district must hold a public hearing prior to the adoption of an extended day schedule.
- (D) The district must document the impact on student achievement as determined by the academic performance index score and any other relevant factors that are a result of the implementation of an extended day schedule.
- (E) The district must provide an annual report to the State Board of Education on the result of the extended day schedule and the impact on student achievement. [70 O.S. § 1-109]
- (j) If, because of emergency situations, school has been missed more than fifteen (15) days, the State Board of Education will consider forgiving a portion of those days or in rare instances all days missed, on a case-by-case basis. Exceptions to the fifteen (15) day minimum will be made at the recommendation of the State Superintendent and forgiveness will be considered by the State Board of Education on a case-by-case basis.
- (j) If a school district determines that it is necessary to deviate from the required 6-hour school day because of severe weather conditions or fire, the superintendent should report this, in writing, to the State Department of Education, Accreditation Section, within 72 hours. Any loss of school time shall require the superintendent to report the amount of time lost and the procedures to be used to make up the lost time.
- (k) *Schools shall obtain permission from the State Board of Education before conducting Saturday classes to complete a standard school term including professional days.* [70 O.S. § 1-112] (09)

### 210:10-1-4. Length of term

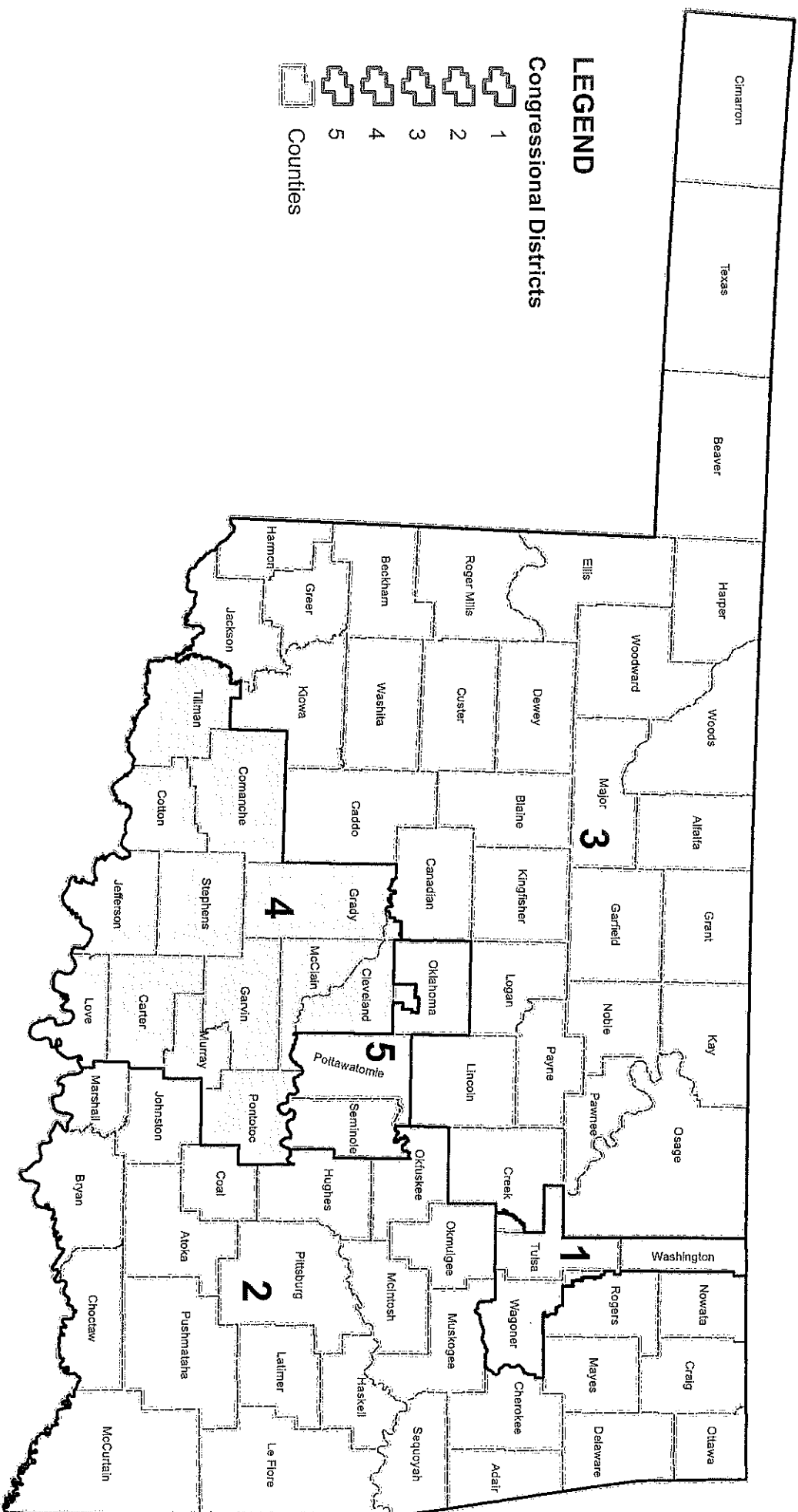
- (a) The minimum length of term will be ten (10) months (180 days actually taught). Provided not to exceed five (5) days of 180 days required may be used for attendance of professional meetings. Where professional days are taken, they shall be so recorded in the register of attendance in a like manner as holidays are recorded. The legal aggregate days attendance will be divided by days actually taught to obtain the legal average daily attendance. Any school district holding less than a full term will have its state aid reduced proportionately. No district may have less than a full term of school unless conditions over which it has no control exist that would prevent the district holding a full term. In cases where sites within a district have different length terms the average daily membership (ADM) and average daily attendance (ADA) shall be calculated for each site separately.

### 210:35-3-47. School reports and records

Well delineated policies and procedures for records and reports shall be developed and kept current.

- (1) Records and reports needed for effective planning, operation, evaluation, and reporting shall be kept relative to the following components of the educational program:
  - (A) Administrative operations
  - (B) Curriculum
  - (C) Guidance
  - (D) Health services

# Oklahoma Congressional Districts Elections

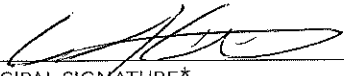


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# SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

for 20<sup>22</sup> – 20<sup>23</sup> school year

Cleveland Little Axe  
COUNTY SCHOOL DISTRICT  
2000 168TH Ave NE Norman 73026  
SCHOOL DISTRICT MAILING ADDRESS CITY ZIP CODE  
High School Alternative Education  
NAME OF SITE

 7/14/2022  
PRINCIPAL SIGNATURE\* DATE

PRINCIPAL SIGNATURE\* DATE

PRINCIPAL SIGNATURE\* DATE

Jay Thomas


SUPERINTENDENT NAME (PLEASE PRINT)

jay.thomas@littleaxeps.org

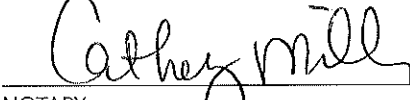
SUPERINTENDENT E-MAIL ADDRESS

 7/14/2022  
SUPERINTENDENT SIGNATURE\* DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on 7-14, 2022

 BOARD PRESIDENT SIGNATURE\*

NOTARY SEAL →

 7-14-22  
NOTARY DATE

July 21, 2024  
COMMISSION EXPIRATION DATE

Statute/Oklahoma Administrative Code to be Waived:

(specify statute or OAC (deregulation) number: (see instructions))

OAC 210:35-3-46

\*Original signatures are required. The attached questionnaire must be answered to process.\*\*

## THE WAIVER/DEREGUALTION IS REQUESTED FOR:

☒ One Year Only

☐ Three Years\*

\*Please see instruction page for additional requirements for a three year request

## SDE USE ONLY

PROJECT YEARS

\_\_\_\_\_ of \_\_\_\_\_

### ENROLLMENT

\_\_\_\_\_ High School

\_\_\_\_\_ Jr./Middle High

\_\_\_\_\_ Elementary

\_\_\_\_\_ District Total

RECEIVED JUL 28 2022

DATE RECEIVED

70 O.S. \_\_\_\_\_

OAC 210:35-29-2

Abbreviated Pay  
NAME OF WAIVER

**A. Reason for the waiver/deregulation request (be specific).**

The purpose of this request is to provide students an alternative method of instruction during a time outside the regular school day. Students who have a difficult time in the traditional setting will be offered an alternative time between 1:00 P.M. and 5:30 P.M. This allows students who are working, have children, those who have a difficult time in the mornings, those who are behind on credits, and those who do not function well in a traditional school environment to come to school and be successful. Further, it allows an opportunity for students to graduate from high school who would not do so otherwise. This program has been very successful in the past allowing students to graduate with a diploma who had either dropped out or were on the road to dropping out.

**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 and learning achievement.**

Little Axe Public Schools has implemented this schedule for the alternative school for many years and has had continual success in doing so because of the change from a traditional schedule. The current alternative school schedule has been successful in helping students complete high school. The opportunity to complete high school will give these students many more opportunities in the future. Outside sources are coming in to the alternative education setting at Little Axe Public School. Individuals are discussing life skills and assisting the students in writing resumes, interview skills, mock interviews, the importance of a high school education, and other resources that may be identified during the year. This program utilizes online curriculum where the students are encouraged to complete assignments at home as well as at school. Through the use of an online curriculum, the program is self-paced allowing the students to progress more quickly if they choose. Since they are using an online curriculum, the factor of being in a classroom and possible distractions that come with that as well as student/teacher interactions that may be difficult for some students are mostly removed. Resources are provided for the students in class on a daily basis for those needing help in specific subject areas.

**C. Educational impact to the district: Results of the Statutory Waiver/Deregulation, i.e., effect on student performance levels, impact of plan on other sites in the district.**

The result to the of the Statutory Waiver/Deregulation is the opportunity for several students to complete high school and allow more opportunities than would otherwise be afforded if they were to drop out of high school. Our record over the past several years has been impressive. We have been able to help students graduate that would not otherwise have had the opportunity to do so using this method. This program also serves as a means to get students back into the traditional setting serving as a bridge from difficulties for a variety of reasons such as home problems or personal weaknesses and allows them to set and achieve goals. There is a minimal impact on other sites in the district as this program is housed in the High School and does not affect other sites.



**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)

The alternative education classes will meet within the calendar of traditional school. The days for classes are Monday-Thursday from 1:00-5:30 P.M. Students are allowed to come to school and eat lunch with the rest of the student body prior to beginning class each day, if they choose to do so. Little Axe Public School offers a late bus run so these students can ride a bus to school. Further, students attend visits to the local vocational center, career fairs, college visits, and are encouraged to attend any other school enrichment activities. Students are allowed to arrive early to work on assignments and, as stated previously, are also encouraged to work from home online, which, many students choose to do in order to (a) keep up with work as scheduled and (b) get ahead on assignments in order to progress through the program more quickly. In addition to the required instruction, students are required to undergo 1 hour of counseling per week to ensure their continued success in the program.

**E. Any financial impact to the District (positive or negative) for the proposed waiver/deregulation.**

The only financial impact to the district will be the necessary funding for teacher and assistant stipends which exceeds the allocation given by the state for alternative education programs. Due to the fact that these students are still in the high school, still transported in the evening time, and are still offered assistance from teachers, there is truly not very much financial impact on the school positively or negatively. There is one identifiable positive impact on the school, is that we keep students enrolled rather than dropping out thus increasing our ADM for funding.

**F. Describe method of assessment or evaluation of effectiveness of the plan.**

Each year the alternative education program is reviewed to determine its effectiveness and assurance in meeting all state and alternative education requirements. Parent/teacher surveys are conducted regularly where the alternative education director assesses the surveys to make improvements and adjustments as necessary. The online curriculum is designed to effectively assess students before and after instruction as well as gives an initial assessment for each unit. In using pre and post coursework data, the Alternative Education Director is able to assess the effectiveness of this coursework and further make adjustments as needed. All students admitted into the program are interviewed before entering the program, in December of each year, then again in May of each year where they have an opportunity to share thoughts of the effectiveness of the program. Further, exit interviews are conducted when students graduate.



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14 1070 LITTLE AXE

|                                |                            |
|--------------------------------|----------------------------|
| Superintendent's Name          | Jay Thomas                 |
| Superintendent's Email Address | jay.thomas@littleaxepe.org |
| Superintendent's Phone         | (405) 329-76919960         |

|   |    |
|---|----|
| Do you participate in an Alternative Education Cooperative or Interlocal Cooperative for Alternative Education? | No |
|---|----|

|  |    |
|--|----|
| Is your district the Local Education Agency (LEA) for the Alternative Education Program? | No |
|--|----|

LEA of Alternative Education Cooperative or Interlocal Cooperative

|                   |          |
|-------------------|----------|
| Allocation Amount | 16960.01 |
|-------------------|----------|

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**COOPERATIVE INFORMATION**

If you participate in an Alternative Education Cooperative, your member districts will be listed below:

| County | District | District Name | Allocation   |
|--------|----------|---------------|--------------|
| 14     | 1070     | LITTLE AXE    | 16960.01     |
|        |          |               | <hr/> #Error |

**LEA PROGRAM INFORMATION**

|                                    |                                       |
|------------------------------------|---------------------------------------|
| 1. Program Name                    | Little Axe Alternative Academy        |
| 2. Physical Address (Not a PO Box) | 2000 168th Ave NE<br>Norman, OK 73026 |
| 3. Director/Lead Teacher Name      | Amber Harp                            |
| 4. Contact Title                   | Counselor                             |
| 5. Contact Telephone               | 4053291612                            |
| 6. Contact Fax                     | 4055792932                            |

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|  |                                     |          |                                     |
|--|-------------------------------------|----------|-------------------------------------|
| <b>7. Mailing Address (Street)</b>   | 2000 168th Ave NE                   |          |                                     |
| <b>8. Mailing Address (City)</b>   | Norman                              |          |                                     |
| <b>9. Mailing Address (Zip)</b>  | 73026                               |          |                                     |
| <b>10. Contact Email</b>   | amber.harp@littleaxepe.org          |          |                                     |
| <b>11. Length of Program</b>   |                                     |          |                                     |
| Program runs 4 hours 12 minutes 5 days a week  |                                     |          | <input type="checkbox"/>            |
| 756 hours in your school calendar  |                                     |          | <input type="checkbox"/>            |
| Deregulation turned into Accreditation office date of submission   |                                     |          | <input checked="" type="checkbox"/> |
| <b>12. Days Operating</b>  | M-TH                                |          |                                     |
| <b>13. Time Program Begins</b>   | 12:30 PM                            |          |                                     |
| <b>14. Time Program Ends</b>   | 05:00 PM                            |          |                                     |
| <b>15. Grade Levels Served</b>   |                                     |          |                                     |
| Grade 7  | <input type="checkbox"/>            | Grade 8  | <input type="checkbox"/>            |
| Grade 9  | <input checked="" type="checkbox"/> | Grade 10 | <input checked="" type="checkbox"/> |
| Grade 11   | <input checked="" type="checkbox"/> | Grade 12 | <input checked="" type="checkbox"/> |
| <b>16. How many students are being served each day?</b>  | 15                                  |          |                                     |
| <b>16 A. If serving less than 10 students and not cooping have you completed a Statutory Waiver/Deregulation Application for Alternative Education? (Due Oct 1)</b>  |                                     |          |                                     |
| <b>17. Of the above number, how many students attend a Career Technology Center?</b>   | 5                                   |          |                                     |
| <b>18. How many Alternative Education students take classes at the traditional school in addition to their classes in the Alternative Education Academy Program?</b> | 3                                   |          |                                     |
| <b>19. How many Alternative Education students are concurrently enrolled in college or university courses?</b>   | 0                                   |          |                                     |

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**TEACHER INFORMATION**

|   |                              |
|---|------------------------------|
| 20. Teacher Name  | David Bounds                 |
| 21. Email Address   | david.bounds@littleaxeps.org |
| 22. Years of experience   | >25                          |
| 23. Degree Held   | BA                           |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 2                            |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 3485.46                      |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                          |
| 27. Teacher Certification Number  | 131381                       |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                           |

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|   |                                  |
|---|----------------------------------|
| 20. Teacher Name  | Trey Kirkpatrick                 |
| 21. Email Address   | trey.kirkpatrick@littleaxeps.org |
| 22. Years of experience   | 12                               |
| 23. Degree Held   | MA                               |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 2                                |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 2746.44                          |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                              |
| 27. Teacher Certification Number  | 405825                           |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | Yes                              |

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|   |                             |
|---|-----------------------------|
| 20. Teacher Name  | Dana Stroud                 |
| 21. Email Address   | dana.stroud@littleaxeps.org |
| 22. Years of experience   | 10                          |
| 23. Degree Held   | BA                          |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 2                           |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 2574.24                     |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                         |
| 27. Teacher Certification Number  | 411755                      |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | Yes                         |

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|   |                               |
|---|-------------------------------|
| 20. Teacher Name  | Ruby McCaslin                 |
| 21. Email Address   | ruby.mccaslin@littleaxeps.org |
| 22. Years of experience   | 22                            |
| 23. Degree Held   | MA                            |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 2                             |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 3044.64                       |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                           |
| 27. Teacher Certification Number  | 206691                        |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                            |

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|                  |                 |
|------------------|-----------------|
| 20. Teacher Name | Daniel Mitchell |
|------------------|-----------------|

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|   |                                 |
|---|---------------------------------|
| 21. Email Address   | daniel.mitchell@littleaxepe.org |
| 22. Years of experience   | >25                             |
| 23. Degree Held   | MA                              |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 2                               |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 3216.96                         |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                             |
| 27. Teacher Certification Number  | 185113                          |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                              |

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**ADMINISTRATOR/COUNSELOR INFORMATION**

|   |  |
|---|--|
|   | Counselor Type   |
| 29. Administrator or Counselor Name                                       | Amber Harp   |
| 30. Email address   | amber.harp@littleaxepe.org   |
| 31. Documented duties performed in the Alternative Education Program      | Administer the program, see to discipline, screen meetings, scheduling, counseling, career planning, okline school coordinator, enrollment |
| 32. Number of hours per week served in the Alternative Education Program. | 4  |
| 33. Is this counselor a certified school guidance counselor?              | --   |
| 34. Salary and benefits   | 11550.00   |
| 35. In what capacity does this individual serve?                          | Administrator  |

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|  |  |
|--|--|
| <b>29. Administrator or Counselor Name</b>                                       | Amber Harp   |
| <b>30. Email address</b>   | amber.harp@littleaxeps.org   |
| <b>31. Documented duties performed in the Alternative Education Program</b>      | Academic counseling, screen meeting attendee, consultation, counseling referrals, school counseling  |
| <b>32. Number of hours per week served in the Alternative Education Program.</b> | 4  |
| <b>33. Is this counselor a certified school guidance counselor?</b>              | School Guidance Counselor  |
| <b>34. Salary and benefits</b>   | 0  |
| <b>35. In what capacity does this individual serve?</b>                          | Counselor  |
| <hr/>  |  |
| <b>29. Administrator or Counselor Name</b>                                       | Lorraine Kruskopp  |
| <b>30. Email address</b>   | lorraine.kruskopp@littleaxeps.org  |
| <b>31. Documented duties performed in the Alternative Education Program</b>      | Daily Proctor the program; monitor progress; report any discipline issues, help with scheduling; help with implementing the academic schedule. |
| <b>32. Number of hours per week served in the Alternative Education Program.</b> | 36   |
| <b>33. Is this counselor a certified school guidance counselor?</b>              | --   |
| <b>34. Salary and benefits</b>   | 11486.48   |
| <b>35. In what capacity does this individual serve?</b>                          | Counselor  |
| <hr/>  |  |



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**COLLABORATIVE AGENCY INFORMATION**

|  |  |
|--|--|
| <b>36. Agency Name</b>                     | Nexus Counseling Service LLC   |
| <b>37. Contact Name</b>                    | Jacquiline Jackson   |
| <b>38. Phone</b>                           | 4059194061   |
| <b>39. Email Address</b>                   | jacquie@nexusmhs.com   |
| <b>40. Services Provided</b>               | Individual and group counseling (crisis, parenting, guidance, mental health, anxiety, social, etc) |
| <b>41. When are the services provided?</b> | Once a week and on a case-by-case basis.   |

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**42. Check all that apply to the district's intake and screening process.**

|  |                                     |
|--|-------------------------------------|
| Approved intake form   | <input checked="" type="checkbox"/> |
| At Risk Indicator  | <input checked="" type="checkbox"/> |
| Parent/guardian present                                      | <input checked="" type="checkbox"/> |
| Teacher from the traditional school                          | <input checked="" type="checkbox"/> |
| Administrator from the traditional school                    | <input checked="" type="checkbox"/> |
| Administrator from the alternative program (when applicable) | <input checked="" type="checkbox"/> |
| Individualized Education Plan (IEP) Change of Placement      | <input checked="" type="checkbox"/> |
| Counselor present  | <input checked="" type="checkbox"/> |
| Cumulative folder  | <input checked="" type="checkbox"/> |
| Student present  | <input checked="" type="checkbox"/> |
| Student transcript   | <input checked="" type="checkbox"/> |
| Written graduation plan for each student                     | <input checked="" type="checkbox"/> |
| Official referral  | <input checked="" type="checkbox"/> |

**43. How often are students allowed to enroll in the Alternative Education Program? Check all that apply.**

|                                  |                                     |
|----------------------------------|-------------------------------------|
| Daily                            | <input checked="" type="checkbox"/> |
| Once each week                   | <input type="checkbox"/>            |
| Monthly only                     | <input type="checkbox"/>            |
| Quarterly only                   | <input type="checkbox"/>            |
| Semester only                    | <input type="checkbox"/>            |
| Other interval. Please describe: | <input type="checkbox"/>            |

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**44. Do you ensure that no indication will appear on the Alternative Education student's transcript that will eliminate the opportunity for high school credit to be accepted at institutions of higher education, career technology centers, and/or the United States Military?**

Yes ☒

**45. List courses that are offered to students in the traditional school that are not available to the students in the Alternative Education Program.**

None, if we need to place in a traditional hour and are able to complete that credit, we will.

**46. Check all instructional strategies and activities that apply to your program. (Documented evidence required)**

|   |   |
|---|---|
| Lesson plans from teacher(s) at the traditional school  | <input checked="" type="checkbox"/>                                     |
| Hands on art instruction  | <input checked="" type="checkbox"/>                                     |
| Cooperative learning  | <input checked="" type="checkbox"/>                                     |
| Distance learning. Please list the distance learning provider used in your Alternative Education Academy program. | <input checked="" type="checkbox"/> Edgenuity                           |
| Computer software. Please list computer software programs used in your Alternative Education Academy program.     | <input checked="" type="checkbox"/> Edgenuity, Google Classroom + Suite |
| Teacher-developed curriculum and learning activities  | <input checked="" type="checkbox"/>                                     |
| Service-learning  | <input checked="" type="checkbox"/>                                     |
| Packaged curricula  | <input type="checkbox"/>  |
| Self-paced  | <input checked="" type="checkbox"/>                                     |
| Project-based learning  | <input checked="" type="checkbox"/>                                     |
| Tutoring  | <input checked="" type="checkbox"/>                                     |
| Individualized instruction  | <input checked="" type="checkbox"/>                                     |
| Life skills instruction for all students  | <input checked="" type="checkbox"/>                                     |

**47. How many hours per week is counseling provided exclusively to Alternative Education students? (Documented evidence required)**

1-3

**48. Check the days counseling is provided exclusively to Alternative Education students.**

|           |                                     |
|-----------|-------------------------------------|
| Monday    | <input checked="" type="checkbox"/> |
| Tuesday   | <input checked="" type="checkbox"/> |
| Wednesday | <input checked="" type="checkbox"/> |
| Thursday  | <input checked="" type="checkbox"/> |
| Friday    | <input type="checkbox"/>            |

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**49. Who provides counseling services?**

Nexus Counseling Service, LLC and Little Axe HS  
Counselor

**50. Indicate the provider's credentials. (Counselor must be certified by SDE or a mental health provider with appropriate licensure.)**

Licensed Clinical Counselor and Certified by SDE

**51. Check all types of counseling strategies used in the Alternative Education Program. (Documented evidence required)**

|                              |                                     |
|------------------------------|-------------------------------------|
| Individual                   | <input checked="" type="checkbox"/> |
| Family                       | <input checked="" type="checkbox"/> |
| Academic                     | <input checked="" type="checkbox"/> |
| Conflict resolution          | <input checked="" type="checkbox"/> |
| Group                        | <input checked="" type="checkbox"/> |
| Teen parenting               | <input checked="" type="checkbox"/> |
| Career                       | <input checked="" type="checkbox"/> |
| Drug/alcohol/substance abuse | <input checked="" type="checkbox"/> |

**52. Which disciplines of art are taught to Alternative Education students? (Documented evidence required)**

|  |                                     |
|--|-------------------------------------|
| Vocal music                                  | <input checked="" type="checkbox"/> |
| Instrumental music                           | <input checked="" type="checkbox"/> |
| Integrated approach (hands-on)               | <input checked="" type="checkbox"/> |
| Performing arts (dance, drama, etc.)         | <input checked="" type="checkbox"/> |
| Visual art (drawing, oil, photography, etc.) | <input checked="" type="checkbox"/> |

**53. Do students receive credit for the arts?**

Yes ☒

**54. The district will support the Alternative Education personnel's attendance at professional development workshops, regional meetings, and seminars provided by the State Department of Education. (Documented evidence required)**

Yes ☒

**55. Students in the Alternative Education Program, who otherwise meet all participation requirements, are allowed to participate in vocational programs and extracurricular activities, including but not limited to athletics, band, and clubs.**

Yes ☒

**56. How many Alternative Education senior students participated in the regular commencement exercises last school year?**

11-20

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**57. How many Alternative Education students were reported on your district's annual Student Dropout Report for the 2020-2021 school year?**

0

**58. Will the Alternative Education Program be operational and ready to serve students on the 1st of September?**

Yes ☒

**59. Are materials and equipment purchased with revenue received for the Alternative Education Program made available exclusively to the Alternative Education students during the hours that the Alternative Education Program is operating?**

Yes ☒

**60. Is the Alternative Education Program site readily ADA Compliant?**

Yes ☒

No ☐

**61. Does the Alternative Education Program regularly provide transportation to students or transportation accessible if needed?**

Yes ☒

No ☐

**62. Does the Alternative Education Program offer food service to students?**

Yes ☒

No ☐

**63. I understand in order to receive funding the evidence criteria review must be completed and students must be coded correctly in your district's student information system.**

Yes ☒

No ☐



*Little Axe Public Schools*

2000 168<sup>th</sup> Ave NE • Norman, OK 73026 • Phone (405) 329-7691 • Fax (405) 579-2929  
[www.littleaxeps.org](http://www.littleaxeps.org)

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August 29<sup>th</sup>, 2022

RE: DREG Abbreviated AltEd Day

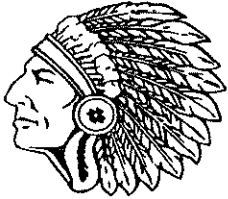
22-23 Alternative Education hours are from 12:30pm-5pm, Mon-Thursday. (18 hrs a week)

Total AltEd hours for the school year 711hrs.

See attached for school calendar.

Thank you,

Amber Harp  
Little Axe High School  
Counselor  
Alternative Education Director



Little Axe Public Schools  
2000 168<sup>th</sup> Ave N.E.  
Norman, OK 73026  
(405) 329-7691

Jay Thomas  
Superintendent

July 14, 2022

Oklahoma State Department of Education  
Attention: Alternative Education  
2500 N. Lincoln Blvd.  
Oklahoma City, OK 73105-4599

Subject: School Site Deregulation Application – 2022-2023

To Whom It May Concern:

In accordance with OAC code 210: 35-3-46, Little Axe School is requesting an Abbreviated Day for Alternative Education to consist of not less than four (4) hours (240 minutes) per day devoted to school activities for the approved school calendar.

If further information is required, please contact me at (405) 329-7691.

Sincerely,

Jay Thomas  
Superintendent

p.c. Amber Harp, Alternative Education Director and High School Counselor  
Trey Kirkpatrick, High School Principal  
File

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BOARD MEMBERS

Beverly Felton, President  
Tommy Hamilton, Member

Tessa Proffitt, Vice-President

Al Heitkamper, Member  
Rickey Gourley II, Member

*Promoting Excellence Through Quality Education*

636

# SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION

for 20 22 - 20 23 school year

Oklahoma COUNTY  
Choctaw Nicoma Park Schools SCHOOL DISTRICT  
14300 NE 10th SCHOOL DISTRICT MAILING ADDRESS  
Choctaw CITY  
73020 ZIP CODE

Choctaw Alternative Transitional School  
NAME OF SITE

Brent Ingraham 08/02/2022  
PRINCIPAL SIGNATURE\* DATE

PRINCIPAL SIGNATURE\* DATE

PRINCIPAL SIGNATURE\* DATE

David Reid  
SUPERINTENDENT NAME (PLEASE PRINT)

dreid@cnpsschools.org  
SUPERINTENDENT E-MAIL ADDRESS

David Reid 08/02/2022  
SUPERINTENDENT SIGNATURE\* DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on \_\_\_\_\_, 20\_\_\_\_

Elizabeth Parker  
BOARD PRESIDENT SIGNATURE

NOTARY SEAL → #18006924  
EXP 07/12/26  
NOTARY  
07/12/2026  
COMMISSION EXPIRATION DATE

Statute/Oklahoma Administrative Code to be Waived: 210:35-29-2  
(specify statute or OAC (deregulation) number: (see instructions))

\*Original signatures are required. The attached questionnaire must be answered to process.\*\*

## THE WAIVER/DEREGULATION IS REQUESTED FOR:

☒ One Year Only

☐ Three Years\*

\*Please see instruction page for additional requirements for a three year request

## SDE USE ONLY

PROJECT YEARS  
\_\_\_\_\_ of \_\_\_\_\_

### ENROLLMENT

\_\_\_\_\_ High School  
\_\_\_\_\_ Jr./Middle High  
\_\_\_\_\_ Elementary  
0 District Total

RECEIVED AUG 12 2022  
DATE RECEIVED

70 O.S. \_\_\_\_\_  
OAC 210:35-29-2

Abbreviated Days  
NAME OF WAIVER

- A. Reason for the Deregulation request. Please include how your students would benefit from this deregulation, what alternative means will have to be employed, and negative effects on your alternative education population if your waiver was to be denied.

We have been very successful with this system for well over twenty years. It provides students with special circumstances and opportunity to complete their high school education and future goals. Our system works with students with their needs as the focal point., Having a system such as this allows our students the flexibility to work around any negative situations they are experiencing. If this request was denied, it would remove the flexibility that has proven itself to be very successful over the twenty years of the program.

- B. List alternate strategies/plans which the district/site proposes, and how this plan will best serve the students of your alternative education program, i.e., a description of the educational benefits to the students, graduation rate if a waiver has been awarded prior to this year, and the result of the previous years alternative education audit.

1. Students of the CATS program will attend core classes Monday through Thursday from 3:40 to 8:05. All students are required to have a day component.

2. This gives these student an oppurtunity to A. Attend Eastern Oklahoma Technology center. B. Approved work site learning. Students must work 10 hours a week. C. Concurrent enrollment and D. Community Service Learning Credit.

- C. Educational impact to the district: Results of the Statutory Waiver, i.e., effect on student performance levels, and predicted graduation rate.

The implementation of this plan allows students at Choctaw High School and Jones High School an alternative avenue or path for completing their high school education. Without this program, students such as ours , with special circumstances could not graduate.



- 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)
- During the course of a semester students are enrolled in 4 classes. Their work is self paced and after completion of a class they meet with the CATS director to move forward with another class. During the course of the year students are able to take electives to add to their credits. Our class calendar as far as days attending are the same as the district except for Fridays.

- 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.
- The financial impact of this waiver is positive as it keeps students in school and working towards graduation. Without this program many students would simply not attend school or complete their education. The financial gain to the district is always reinvested back into our program so that more students can benefit.

- 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.
- Teachers are evaluated on a yearly basis through TLE. Teachers are required to participate in staff development every year.

\*\* You will be contacted if more information is needed to process this request.

C/NP Schools Choctaw Alternative School Calander 2021-2022

| 2022-2023 | M                     | T  | W  | TH | F  | DT  | PT | PD | RD | NC | TDS | MONDAY       | TUESDAY          | WEDNESDAY           | THURSDAY         | FRIDAY       |
|-----------|-----------------------|----|----|----|----|-----|----|----|----|----|-----|--------------|------------------|---------------------|------------------|--------------|
| JULY      |                       |    |    |    | 1  |     |    |    |    |    |     | Non-Contract |                  |                     |                  |              |
|           | 4                     | 5  | 6  | 7  | 8  |     |    |    |    |    |     |              |                  |                     |                  |              |
|           | 11                    | 12 | 13 | 14 | 15 |     |    |    |    |    |     |              |                  |                     |                  |              |
|           | 18                    | 19 | 20 | 21 | 22 |     |    |    |    |    |     |              |                  |                     |                  |              |
|           | 25                    | 26 | 27 | 28 | 29 |     |    |    |    |    |     |              |                  |                     |                  |              |
| AUGUST    | 1                     | 2  | 3  | 4  | 5  | 0   |    |    |    |    |     |              |                  |                     |                  |              |
|           | 8                     | 9  | 10 | 11 | 12 | 0   |    | 2  | 1  |    | 4   |              | New Teacher      | PROF. DEV.          | PROF. DEV.       | ENROLLMENT   |
|           | 15                    | 16 | 17 | 18 | 19 | 3   |    |    | 1  |    | 4   | Record Day   | 1st Day Students |                     |                  | NO SCHOOL    |
|           | 22                    | 23 | 24 | 25 | 26 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
| SEPTEMBER | 29                    | 30 | 31 | 1  | 2  | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           |                       | 6  | 7  | 8  | 9  | 3   |    |    |    |    | 3   | Lab Day      |                  |                     |                  | NO SCHOOL    |
|           | 12                    | 13 | 14 | 15 | 16 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 19                    | 20 | 21 | 22 | 23 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 26                    | 27 | 28 | 29 | 30 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
| OCTOBER   | 3                     | 4  | 5  | 6  | 7  | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 10                    | 11 | 12 | 13 | 14 | 3   |    | 1  |    |    | 4   |              |                  | End of 1st nine wks | PROF. DEV.       | FALL BREAK   |
|           | First Nine Weeks      |    |    |    |    | 33  | 0  | 2  | 2  |    | 35  |              |                  |                     | End of 1st 9 wks | NO SCHOOL    |
|           |                       | 18 | 19 | 20 | 21 | 3   |    |    |    |    | 3   | Fall Break   |                  |                     |                  | NO SCHOOL    |
|           | 24                    | 25 | 26 | 27 | 28 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
| November  | 31                    | 1  | 2  | 3  | 4  | 4   | 1  |    |    |    | 5   |              |                  |                     | PT Conference    | NO SCHOOL    |
|           | 7                     | 8  | 9  | 10 | 11 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 14                    | 15 | 16 | 17 | 18 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 21                    | 22 | 23 | 24 | 25 | 0   |    |    |    |    | 4   | Non-Contract | Non-Contract     | Non-Contract        | Non-Contract     | NO SCHOOL    |
| December  | 28                    | 29 | 30 | 1  | 2  | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 5                     | 6  | 7  | 8  | 9  | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 12                    | 13 | 14 | 15 | 16 | 4   |    |    |    |    | 4   |              |                  |                     | End 2nd 9 wks    | NO SCHOOL    |
|           | Second Nine Weeks     |    |    |    |    | 31  | 1  | 3  | 2  |    | 76  |              |                  |                     |                  |              |
|           | Semester 1            |    |    |    |    | 64  | 1  | 6  | 4  |    | 110 |              |                  |                     |                  |              |
|           | 18                    | 19 | 20 | 21 | 22 |     |    |    |    |    |     | Non-Contract | Non-Contract     | Non-Contract        | Non-Contract     | NO SCHOOL    |
|           | 25                    | 26 | 27 | 28 | 29 |     |    |    |    |    |     | Non-Contract | Non-Contract     | Non-Contract        | Non-Contract     | NO SCHOOL    |
| JANUARY   | 2                     | 3  | 4  | 5  | 6  | 3   |    | 1  |    |    | 4   | Prof Day Day | 1st Day Students |                     |                  | NO SCHOOL    |
|           | 9                     | 10 | 11 | 12 | 13 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 16                    | 17 | 18 | 19 | 20 | 3   |    |    |    |    | 4   | MLK Day      |                  |                     |                  | NO SCHOOL    |
|           | 23                    | 24 | 25 | 26 | 27 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
| FEBRUARY  | 30                    | 31 | 1  | 2  | 3  | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 6                     | 7  | 8  | 9  | 10 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 13                    | 14 | 15 | 16 | 17 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 20                    | 21 | 22 | 23 | 24 | 3   |    | 1  |    |    | 4   | Prof Day Day |                  |                     |                  | NO SCHOOL    |
| MARCH     | 27                    | 28 | 1  | 2  | 3  | 4   |    |    |    |    | 4   |              |                  |                     | End of 3rd 9 wks | NO SCHOOL    |
|           | Third Nine Weeks      |    |    |    |    | 33  | 0  | 2  | 0  |    | 36  |              |                  |                     |                  |              |
|           | 6                     | 7  | 8  | 9  | 10 | 4   | 1  |    |    |    | 4   |              |                  |                     | P/T Conference   | NO SCHOOL    |
|           | 13                    | 14 | 15 | 16 | 17 | 0   |    |    |    |    | 4   | Spring Break | Spring Break     | Spring Break        | Spring Break     | Spring Break |
|           | 20                    | 21 | 22 | 23 | 24 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 27                    | 28 | 29 | 30 | 31 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
| APRIL     | 3                     | 4  | 5  | 6  | 7  | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 10                    | 11 | 12 | 13 | 14 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 17                    | 18 | 19 | 20 | 21 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 24                    | 25 | 26 | 27 | 28 | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
| MAY       | 1                     | 2  | 3  | 4  | 5  | 4   |    |    |    |    | 4   |              |                  |                     |                  | NO SCHOOL    |
|           | 8                     | 9  | 10 | 11 | 12 | 2   |    |    |    |    | 2   |              |                  | Snow Day            | Snow Day         | NO SCHOOL    |
|           | 15                    | 16 | 17 | 18 | 19 | 0   |    |    | 1  | 0  | 0   | Snow Day     | Snow Day         | Snow Day            | Snow Day         | Record Day   |
|           | Fourth Nine Weeks     |    |    |    |    | 34  | 1  | 0  | 1  |    | 38  |              |                  |                     |                  |              |
|           | Semester 2            |    |    |    |    | 67  | 1  | 2  | 1  |    | 74  |              |                  |                     |                  |              |
|           | 2021-2022 School Year |    |    |    |    | 131 | 2  | 7  | 5  |    | 184 |              |                  |                     |                  |              |
|           | 22                    | 23 | 24 | 25 | 26 |     |    |    |    |    |     |              |                  |                     |                  |              |
| JUNE      | 29                    | 30 | 31 | 1  | 2  |     |    |    |    |    |     | Memorial Day |                  |                     |                  |              |
|           | 5                     | 6  | 7  | 8  | 9  |     |    |    |    |    |     |              |                  |                     |                  |              |
|           | 12                    | 13 | 14 | 15 | 16 |     |    |    |    |    |     |              |                  |                     |                  |              |
|           | 19                    | 20 | 21 | 22 | 23 |     |    |    |    |    |     |              |                  |                     |                  |              |
|           | 26                    | 27 | 28 | 29 | 30 |     |    |    |    |    |     |              |                  |                     |                  |              |

APPROVED \_\_\_\_\_

**Oklahoma State Department of Education  
Districtwide Alternative Education Implementation Plan Report  
2022-2023**

55 I004     CHOCTAW-NICOMA PARK

|                                |                       |
|--------------------------------|-----------------------|
| Superintendent's Name          | David Reid            |
| Superintendent's Email Address | dreid@cnpsschools.org |
| Superintendent's Phone         | (405) 390-5481        |

|   |     |
|---|-----|
| Do you participate in an Alternative Education Cooperative or Interlocal Cooperative for Alternative Education? | Yes |
|---|-----|

|  |     |
|--|-----|
| Is your district the Local Education Agency (LEA) for the Alternative Education Program? | Yes |
|--|-----|

LEA of Alternative Education  
Cooperative or Interlocal Cooperative

|                   |          |
|-------------------|----------|
| Allocation Amount | 94670.95 |
|-------------------|----------|

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**COOPERATIVE INFORMATION**

If you participate in an Alternative Education Cooperative, your member districts will be listed below:

| County | District | District Name       | Allocation   |
|--------|----------|---------------------|--------------|
| 55     | I004     | CHOCTAW-NICOMA PARK | 94670.95     |
| 55     | I009     | JONES               | 6335.33      |
|        |          |                     | <hr/> #Error |

**LEA PROGRAM INFORMATION**

|                                    |  |
|------------------------------------|--|
| 1. Program Name                    | CATS-Choctaw Alternative Transitional School |
| 2. Physical Address (Not a PO Box) | 14300 N.E 10th<br>Choctaw, ok 73020          |
| 3. Director/Lead Teacher Name      | Brent Ingraham                               |
| 4. Contact Title                   | Director                                     |
| 5. Contact Telephone               |  |

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|   |  |
|---|--|
| 6. Contact Fax  | 4053906154                                   |
| 7. Mailing Address (Street)   | 14300 NE 10th                                |
| 8. Mailing Address (City)   | Choctaw                                      |
| 9. Mailing Address (Zip)  | 73020  |
| 10. Contact Email   | bingraham@cnpschools.org                     |
| 11. Length of Program   |  |
| Program runs 4 hours 12 minutes 5 days a week   | <input type="checkbox"/>                     |
| 756 hours in your school calendar   | <input type="checkbox"/>                     |
| Deregulation turned into Accreditation office date of submission  | <input checked="" type="checkbox"/>          |
| 12. Days Operating  | M-TH   |
| 13. Time Program Begins   | 03:40 PM                                     |
| 14. Time Program Ends   | 08:05 PM                                     |
| 15. Grade Levels Served   |  |
| Grade 7 <input type="checkbox"/>  | Grade 8 <input type="checkbox"/>             |
| Grade 9 <input checked="" type="checkbox"/>   | Grade 10 <input checked="" type="checkbox"/> |
| Grade 11 <input checked="" type="checkbox"/>  | Grade 12 <input checked="" type="checkbox"/> |
| 16. How many students are being served each day?  | 0  |
| 16 A. If serving less than 10 students and not cooping have you completed a Statutory Waiver/Deregulation Application for Alternative Education? (Due Oct 1)  | --   |
| 17. Of the above number, how many students attend a Career Technology Center?   | 0  |
| 18. How many Alternative Education students take classes at the traditional school in addition to their classes in the Alternative Education Academy Program? | 0  |
| 19. How many Alternative Education students are concurrently enrolled in college or university courses?   | 0  |

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**TEACHER INFORMATION**

|   |                         |
|---|-------------------------|
| 20. Teacher Name  | Sandy Cooper            |
| 21. Email Address   | scooper @cnpschools.org |
| 22. Years of experience   | >25                     |
| 23. Degree Held   | BA                      |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 8                       |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 14, 846                 |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                     |
| 27. Teacher Certification Number  | 14,846                  |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                      |

---

|   |                        |
|---|------------------------|
| 20. Teacher Name  | Sean Dooley            |
| 21. Email Address   | sdooley@cnpschools.org |
| 22. Years of experience   | 13                     |
| 23. Degree Held   | BA                     |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 8                      |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 10,735                 |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                    |
| 27. Teacher Certification Number  | 405530                 |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                     |

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|   |                        |
|---|------------------------|
| 20. Teacher Name  | Angela Harvey          |
| 21. Email Address   | aharvey@cnpschools.org |
| 22. Years of experience   | >25                    |
| 23. Degree Held   | BA                     |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 8                      |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 13,735                 |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                    |
| 27. Teacher Certification Number  | 155085                 |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                     |

---

|   |                         |
|---|-------------------------|
| 20. Teacher Name  | Diana McCarty           |
| 21. Email Address   | dmccarty@cnpschools.org |
| 22. Years of experience   | >25                     |
| 23. Degree Held   | BS                      |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 8                       |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 14,427                  |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                     |
| 27. Teacher Certification Number  | 135336                  |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                      |

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|                  |                |
|------------------|----------------|
| 20. Teacher Name | Gina Stepanick |
|------------------|----------------|

**Oklahoma State Department of Education  
Districtwide Alternative Education Implementation Plan Report  
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|   |                           |
|---|---------------------------|
| 21. Email Address   | gstepanick@cnpschools.org |
| 22. Years of experience   | 20                        |
| 23. Degree Held   | M.Ed                      |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 8                         |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 12,000                    |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                       |
| 27. Teacher Certification Number  | 226620                    |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                        |

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|   |                          |
|---|--------------------------|
| 20. Teacher Name  | Monica Williams          |
| 21. Email Address   | mwilliams@cnpschools.org |
| 22. Years of experience   | 21                       |
| 23. Degree Held   | M.Ed                     |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 8                        |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 12,040                   |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                      |
| 27. Teacher Certification Number  | 211057                   |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | Yes                      |

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|                         |                       |
|-------------------------|-----------------------|
| 20. Teacher Name        | Leah Stone            |
| 21. Email Address       | lstone@cnpschools.org |
| 22. Years of experience | 22                    |

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|   |                       |
|---|-----------------------|
| 23. Degree Held   | MS                    |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 8                     |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 12,562                |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                   |
| 27. Teacher Certification Number  | 212289                |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | Yes                   |
| <hr/>   |                       |
| 20. Teacher Name  | Beverly Woods         |
| 21. Email Address   | bwoods@cnpschools.org |
| 22. Years of experience   | >25                   |
| 23. Degree Held   | M.Ed                  |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 8                     |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 14,925                |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                   |
| 27. Teacher Certification Number  | 154091                |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                    |
| <hr/>   |                       |

**ADMINISTRATOR/COUNSELOR INFORMATION**



**Oklahoma State Department of Education  
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Counselor Type

|  |  |
|--|--|
| <b>29. Administrator or Counselor Name</b>                                       | Brent Ingraham   |
| <b>30. Email address</b>   | bingraham@cnpschools.org   |
| <b>31. Documented duties performed in the Alternative Education Program</b>      | Director of Alternative education  |
| <b>32. Number of hours per week served in the Alternative Education Program.</b> | 40   |
| <b>33. Is this counselor a certified school guidance counselor?</b>              | --   |
| <b>34. Salary and benefits</b>   | 92,000   |
| <b>35. In what capacity does this individual serve?</b>                          | Administrator  |
| <hr/>  |  |
| <b>29. Administrator or Counselor Name</b>                                       | Dr. Kelly Collins  |
| <b>30. Email address</b>   | kcollins@cnpschools.org  |
| <b>31. Documented duties performed in the Alternative Education Program</b>      | Dr. Collins will help with scheduling and state testing. She will also have conferences with students about emotional issues and social issues |
| <b>32. Number of hours per week served in the Alternative Education Program.</b> | 4  |
| <b>33. Is this counselor a certified school guidance counselor?</b>              | LPC  |
| <b>34. Salary and benefits</b>   | 6, 000   |
| <b>35. In what capacity does this individual serve?</b>                          | Counselor  |
| <hr/>  |  |
| <b>29. Administrator or Counselor Name</b>                                       | Doug Kretchmar   |
| <b>30. Email address</b>   | dkretchmar@cnpschools.org  |
| <b>31. Documented duties performed in the Alternative Education Program</b>      | Counselor 2 days a week  |
| <b>32. Number of hours per week served in the Alternative Education Program.</b> | 8  |
| <b>33. Is this counselor a certified school guidance counselor?</b>              | School Guidance Counselor  |
| <b>34. Salary and benefits</b>   | 6, 000   |

**Oklahoma State Department of Education  
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35. In what capacity does this individual serve? Counselor

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**COLLABORATIVE AGENCY INFORMATION**

|                                     |   |
|-------------------------------------|---|
| 36. Agency Name                     | Choctaw Alternative Transitional School |
| 37. Contact Name                    | Brent Ingraham                          |
| 38. Phone                           | 4053906832                              |
| 39. Email Address                   | bingraham@cnpsschools.org               |
| 40. Services Provided               | The CATS high school provides           |
| 41. When are the services provided? | Monday thru Thursday 3:40 to 8:05.      |

---

**42. Check all that apply to the district's intake and screening process.**

|  |                                     |
|--|-------------------------------------|
| Approved intake form   | <input checked="" type="checkbox"/> |
| At Risk Indicator  | <input checked="" type="checkbox"/> |
| Parent/guardian present                                      | <input checked="" type="checkbox"/> |
| Teacher from the traditional school                          | <input type="checkbox"/>            |
| Administrator from the traditional school                    | <input type="checkbox"/>            |
| Administrator from the alternative program (when applicable) | <input checked="" type="checkbox"/> |
| Individualized Education Plan (IEP) Change of Placement      | <input checked="" type="checkbox"/> |
| Counselor present  | <input type="checkbox"/>            |
| Cumulative folder  | <input checked="" type="checkbox"/> |
| Student present  | <input checked="" type="checkbox"/> |
| Student transcript   | <input checked="" type="checkbox"/> |
| Written graduation plan for each student                     | <input checked="" type="checkbox"/> |
| Official referral  | <input checked="" type="checkbox"/> |

**43. How often are students allowed to enroll in the Alternative Education Program? Check all that apply.**

|                |                          |
|----------------|--------------------------|
| Daily          | <input type="checkbox"/> |
| Once each week | <input type="checkbox"/> |
| Monthly only   | <input type="checkbox"/> |
| Quarterly only | <input type="checkbox"/> |

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Semester only ☐

Other interval. Please describe: ☒ Daily at the beginning of the year. then as needed d

**44. Do you ensure that no indication will appear on the Alternative Education student's transcript that will eliminate the opportunity for high school credit to be accepted at institutions of higher education, career technology centers, and/or the United States Military?**

Yes ☒

**45. List courses that are offered to students in the traditional school that are not available to the students in the Alternative Education Program.**

Spanish, Computer apps 2, Athletics,

**46. Check all instructional strategies and activities that apply to your program. (Documented evidence required)**

|   |  |
|---|--|
| Lesson plans from teacher(s) at the traditional school  | <input checked="" type="checkbox"/>                  |
| Hands on art instruction  | <input checked="" type="checkbox"/>                  |
| Cooperative learning  | <input checked="" type="checkbox"/>                  |
| Distance learning. Please list the distance learning provider used in your Alternative Education Academy program. | <input checked="" type="checkbox"/> Goggle Classroom |
| Computer software. Please list computer software programs used in your Alternative Education Academy program.     | <input checked="" type="checkbox"/> Goggle Classroom |
| Teacher-developed curriculum and learning activities  | <input checked="" type="checkbox"/>                  |
| Service-learning  | <input type="checkbox"/>                             |
| Packaged curricula  | <input checked="" type="checkbox"/>                  |
| Self-paced  | <input checked="" type="checkbox"/>                  |
| Project-based learning  | <input type="checkbox"/>                             |
| Tutoring  | <input checked="" type="checkbox"/>                  |
| Individualized instruction  | <input checked="" type="checkbox"/>                  |
| Life skills instruction for all students  | <input checked="" type="checkbox"/>                  |

**47. How many hours per week is counseling provided exclusively to Alternative Education students? (Documented evidence required)**

> 6

**48. Check the days counseling is provided exclusively to Alternative Education students.**

|           |                                     |
|-----------|-------------------------------------|
| Monday    | <input checked="" type="checkbox"/> |
| Tuesday   | <input checked="" type="checkbox"/> |
| Wednesday | <input checked="" type="checkbox"/> |
| Thursday  | <input checked="" type="checkbox"/> |
| Friday    | <input type="checkbox"/>            |

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**49. Who provides counseling services?**

Choctaw Nicoma Park Schools

**50. Indicate the provider's credentials. (Counselor must be certified by SDE or a mental health provider with appropriate licensure.)**

**51. Check all types of counseling strategies used in the Alternative Education Program. (Documented evidence required)**

|                              |                                     |
|------------------------------|-------------------------------------|
| Individual                   | <input checked="" type="checkbox"/> |
| Family                       | <input type="checkbox"/>            |
| Academic                     | <input checked="" type="checkbox"/> |
| Conflict resolution          | <input checked="" type="checkbox"/> |
| Group                        | <input type="checkbox"/>            |
| Teen parenting               | <input checked="" type="checkbox"/> |
| Career                       | <input type="checkbox"/>            |
| Drug/alcohol/substance abuse | <input type="checkbox"/>            |

**52. Which disciplines of art are taught to Alternative Education students? (Documented evidence required)**

|  |                                     |
|--|-------------------------------------|
| Vocal music                                  | <input type="checkbox"/>            |
| Instrumental music                           | <input type="checkbox"/>            |
| Integrated approach (hands-on)               | <input type="checkbox"/>            |
| Performing arts (dance, drama, etc.)         | <input checked="" type="checkbox"/> |
| Visual art (drawing, oil, photography, etc.) | <input checked="" type="checkbox"/> |

**53. Do students receive credit for the arts?**

|     |                                     |
|-----|-------------------------------------|
| Yes | <input checked="" type="checkbox"/> |
|-----|-------------------------------------|

**54. The district will support the Alternative Education personnel's attendance at professional development workshops, regional meetings, and seminars provided by the State Department of Education. (Documented evidence required)**

|     |                                     |
|-----|-------------------------------------|
| Yes | <input checked="" type="checkbox"/> |
|-----|-------------------------------------|

**55. Students in the Alternative Education Program, who otherwise meet all participation requirements, are allowed to participate in vocational programs and extracurricular activities, including but not limited to athletics, band, and clubs.**

|     |                                     |
|-----|-------------------------------------|
| Yes | <input checked="" type="checkbox"/> |
|-----|-------------------------------------|

**56. How many Alternative Education senior students participated in the regular commencement exercises last school year?**

> 40

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**57. How many Alternative Education students were reported on your district's annual Student Dropout Report for the 2020-2021 school year?**

15

**58. Will the Alternative Education Program be operational and ready to serve students on the 1st of September?**

Yes ☒

**59. Are materials and equipment purchased with revenue received for the Alternative Education Program made available exclusively to the Alternative Education students during the hours that the Alternative Education Program is operating?**

Yes ☒

**60. Is the Alternative Education Program site readily ADA Compliant?**

Yes ☒

No ☐

**61. Does the Alternative Education Program regularly provide transportation to students or transportation accessible if needed?**

Yes ☒

No ☐

**62. Does the Alternative Education Program offer food service to students?**

Yes ☒

No ☐

**63. I understand in order to receive funding the evidence criteria review must be completed and students must be coded correctly in your district's student information system.**

Yes ☒

No ☐

# Choctaw/Nicoma Park Schools

## ALTERNATIVE EDUCATION ACADEMY

### "CATS"

Brent Ingraham  
Director

August 1, 2022

To Whom It May Concern:

The Choctaw/Nicoma Park School District is submitting a school site-deregulation application, for the purpose of our Choctaw Alternative Transitional School. We are requesting an abbreviated school day. The day will consist of four hours and twenty-five minutes devoted to school activities with a day component requirement.

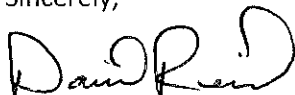
We wish to continue our Alternative Education Program on the same schedule as before since the program was implemented in the 94-95 school year. The students will attend core classes Monday through Thursday from 3:40-8:05 P.M. All students are required to have one of the following day components.

1. Attend Eastern Oklahoma County Technology Center
2. Approved Work-Site Learning
3. Approved Community Service Learning
4. Concurrent Enrollment

If you have any questions or need additional information, please contact me through email [dreid@cnpsschools.org](mailto:dreid@cnpsschools.org) or by phone at 405-390-5481.

Thank you for your time and consideration.

Sincerely,



David Reid, Superintendent  
Choctaw/Nicoma Park School District

**SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION**  
**for 2022 – 2023 school year**

Oklahoma

COUNTY

Harrah

SCHOOL DISTRICT

20670 Walker Street

SCHOOL DISTRICT MAILING ADDRESS

Harrah

CITY

73045

ZIP CODE

Harrah Middle School/Harrah High School

NAME OF SITE

*[Signature]*

PRINCIPAL SIGNATURE\*

2 Aug 2022

DATE

*[Signature]*

PRINCIPAL SIGNATURE\*

8/2/22

DATE

PRINCIPAL SIGNATURE\*

DATE

Paul Blessington

SUPERINTENDENT NAME (PLEASE PRINT)

pblessington@harrahschools.com

SUPERINTENDENT E-MAIL ADDRESS

*[Signature]*

SUPERINTENDENT SIGNATURE\*

8/8/2022

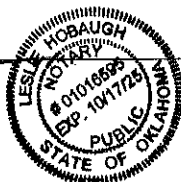
DATE

I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on Aug 8, 2022

*[Signature]*

BOARD PRESIDENT SIGNATURE\*

NOTARY SEAL →



*[Signature]*

NOTARY

DATE

8/8/2022

10/17/2025

COMMISSION EXPIRATION DATE

Statute/Oklahoma Administrative Code to be Waived:

(specify statute or OAC (deregulation) number: (see instructions))

\*Original signatures are required. The attached questionnaire must be answered to process.\*\*

**THE WAIVER/DEREGUALTION IS REQUESTED FOR:**

X One Year Only

— Three Years\*

\*Please see instruction page for additional requirements for a three year request

**SDE USE ONLY**

PROJECT YEARS  
of

**ENROLLMENT**

High School

Jr./Middle High

Elementary

District Total

RECEIVED AUG 11 2022  
DATE RECEIVED

70 O.S.

OAC 20:35-29-2

*[Signature]*  
NAME OF WAIVER

**A. Reason for the waiver/deregulation request (be specific).**

OAC 210:35-29-2 and OAC 210:35-3-46

Abbreviated school day means for the purpose of alternative education program approved by the State Board of Education, a school day which consists of not less than four (4) hours per day devoted to the school activities, for the locally approved 165-day school calendar.

**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 and learning achievement.**

The alternative strategies include the following: 1. The time frame for the Harrah Alternative School, which provides opportunities for students in grades 6-12 to attend, will be from 3:00 PM to 7:15 PM. This deregulation of the day allows middle school and high school students to work during the daytime, attend vocational school, enjoy concurrent enrollment and go to school in the evening. 2. Teachers are certified, but may teach out of their certified area so that students can receive many different curriculum areas. All teachers are highly qualified in the areas they teach. The curriculum will be taught through hands-on activities, group activities, and extensive individual and group counseling from certified school counselors. Additional counseling services may be provided by Tri-City Youth and Family Counseling Services. The counselors and teachers will also implement counseling and life skills.

**C. Educational impact to the district: Results of the Statutory Waiver/Deregulation, i.e., effect on student performance levels, impact of plan on other sites in the district.**

The Harrah Alternative School provides an educational environment that better suits some students. Counselors and administrators recognize this need and encourage students struggling within the regular school curriculum and/or environment as well as potential drop-outs to attend the alternative program. Some participants are needing to work for various reasons and the alternative program accommodates work schedules. Participants are encouraged to take vocational courses during the day. Approximately eight to ten seniors graduate each year that would not have graduated without this opportunity. The success of the Harrah Alternative School positively impacts the overall graduation rate for Harrah Public Schools.



**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)

A Harrah Public Schools 2022-23 school calendar is included with this application. All holidays and professional days of Harrah Public Schools will be observed by the Alternative School. The Harrah Alternative School teachers will participate in the district's scheduled parent-teacher conferences so that the days scheduled for parent-teacher conferences will be considered days taught. Two days are scheduled during the 2022-23 school year for parent-teacher conferences.

**E. Any financial impact to the District (positive or negative) for the proposed waiver/deregulation.**

Without the deregulation the district would be greatly impacted because these students would need to be placed in regular school. It would be a burden to the middle school and high school because of lack of classroom space during the day. Certified teachers and staff are not available during the school day but are available for after-hours teaching assignments. The Alternative Education grant allocation will be used to pay for the salaries and fixed charges including the additional 5% for the teachers and counselors. Remaining funds will be used to purchase instructional equipment, program software, materials, and supplies that will be utilized for alternative education. Alternative education teachers will be encouraged to participate in instructional improvement activities/programs related to alternative education.

**F. Describe method of assessment or evaluation of effectiveness of the plan.**

The TABE will be given as a pre-test for grade level in spelling, reading, and math. It will be given with each student's exit as a post-test assessment. The OSDE will formally evaluate the process and review the findings. Individual teachers will evaluate students daily in the classroom. They will document at least two grades each week. Students will also be tested to prove competency as they complete each unit.

# HARRAH PUBLIC SCHOOLS

## 2022-2023 School Calendar

| August 2022 |    |    |    |    |    |    |
|-------------|----|----|----|----|----|----|
| Su          | M  | Tu | W  | Th | F  | Sa |
|             | 1  | 2  | 3  | 4  | 5  | 6  |
| 7           | 8  | 9  | 10 | 11 | 12 | 13 |
| 14          | 15 | 16 | 17 | 18 | 19 | 20 |
| 21          | 22 | 23 | 24 | 25 | 26 | 27 |
| 28          | 29 | 30 | 31 |    |    |    |

| September 2022 |    |    |    |    |    |    |
|----------------|----|----|----|----|----|----|
| Su             | M  | Tu | W  | Th | F  | Sa |
|                |    |    |    | 1  | 2  | 3  |
| 4              | 5  | 6  | 7  | 8  | 9  | 10 |
| 11             | 12 | 13 | 14 | 15 | 16 | 17 |
| 18             | 19 | 20 | 21 | 22 | 23 | 24 |
| 25             | 26 | 27 | 28 | 29 | 30 |    |

| October 2022 |    |    |    |    |    |    |
|--------------|----|----|----|----|----|----|
| Su           | M  | Tu | W  | Th | F  | Sa |
|              |    |    |    |    |    | 1  |
| 2            | 3  | 4  | 5  | 6  | 7  | 8  |
| 9            | 10 | 11 | 12 | 13 | 14 | 15 |
| 16           | 17 | 18 | 19 | 20 | 21 | 22 |
| 23           | 24 | 25 | 26 | 27 | 28 | 29 |
| 30           | 31 |    |    |    |    |    |

| November 2022 |    |    |    |    |    |    |
|---------------|----|----|----|----|----|----|
| Su            | M  | Tu | W  | Th | F  | Sa |
|               |    | 1  | 2  | 3  | 4  | 5  |
| 6             | 7  | 8  | 9  | 10 | 11 | 12 |
| 13            | 14 | 15 | 16 | 17 | 18 | 19 |
| 20            | 21 | 22 | 23 | 24 | 25 | 26 |
| 27            | 28 | 29 | 30 |    |    |    |

| December 2022 |    |    |    |    |    |    |
|---------------|----|----|----|----|----|----|
| Su            | M  | Tu | W  | Th | F  | Sa |
|               |    |    |    | 1  | 2  | 3  |
| 4             | 5  | 6  | 7  | 8  | 9  | 10 |
| 11            | 12 | 13 | 14 | 15 | 16 | 17 |
| 18            | 19 | 20 | 21 | 22 | 23 | 24 |
| 25            | 26 | 27 | 28 | 29 | 30 | 31 |







| January 2023 |    |    |    |    |    |    |
|--------------|----|----|----|----|----|----|
| Su           | M  | Tu | W  | Th | F  | Sa |
| 1            | 2  | 3  | 4  | 5  | 6  | 7  |
| 8            | 9  | 10 | 11 | 12 | 13 | 14 |
| 15           | 16 | 17 | 18 | 19 | 20 | 21 |
| 22           | 23 | 24 | 25 | 26 | 27 | 28 |
| 29           | 30 | 31 |    |    |    |    |

| February 2023 |    |    |    |    |    |    |
|---------------|----|----|----|----|----|----|
| Su            | M  | Tu | W  | Th | F  | Sa |
|               |    |    | 1  | 2  | 3  | 4  |
| 5             | 6  | 7  | 8  | 9  | 10 | 11 |
| 12            | 13 | 14 | 15 | 16 | 17 | 18 |
| 19            | 20 | 21 | 22 | 23 | 24 | 25 |
| 26            | 27 | 28 |    |    |    |    |

| March 2023 |    |    |    |    |    |    |
|------------|----|----|----|----|----|----|
| Su         | M  | Tu | W  | Th | F  | Sa |
|            |    |    | 1  | 2  | 3  | 4  |
| 5          | 6  | 7  | 8  | 9  | 10 | 11 |
| 12         | 13 | 14 | 15 | 16 | 17 | 18 |
| 19         | 20 | 21 | 22 | 23 | 24 | 25 |
| 26         | 27 | 28 | 29 | 30 | 31 |    |

| April 2023 |    |    |    |    |    |    |
|------------|----|----|----|----|----|----|
| Su         | M  | Tu | W  | Th | F  | Sa |
|            |    |    |    |    |    | 1  |
| 2          | 3  | 4  | 5  | 6  | 7  | 8  |
| 9          | 10 | 11 | 12 | 13 | 14 | 15 |
| 16         | 17 | 18 | 19 | 20 | 21 | 22 |
| 23         | 24 | 25 | 26 | 27 | 28 | 29 |
| 30         |    |    |    |    |    |    |

| May 2023 |    |    |    |    |    |    |
|----------|----|----|----|----|----|----|
| Su       | M  | Tu | W  | Th | F  | Sa |
|          | 1  | 2  | 3  | 4  | 5  | 6  |
| 7        | 8  | 9  | 10 | 11 | 12 | 13 |
| 14       | 15 | 16 | 17 | 18 | 19 | 20 |
| 21       | 22 | 23 | 24 | 25 | 26 | 27 |
| 28       | 29 | 30 | 31 |    |    |    |

|   |                                      |
|---|--------------------------------------|
|  | No School                            |
|  | Professional Development - No School |
|  | Teacher Work Day - No School         |
|  | Snow Day                             |
|  | Parent Teacher Conferences           |
|  | First and Last Day of School         |

|   |  |
|---|--|
| First Semester (82 Instructional Days)  |  |
| 1st Quarter-August to October (41 Days) |  |
| 2nd Quarter-October to Dec. (41 days)   |  |
| Second Semester (85 Instructional Days) |  |
| 3rd Quarter-January to March (44 Days)  |  |
| 4th Quarter-March to May (41 Days)      |  |

|                               |   |           |  |
|-------------------------------|---|-----------|--|
| Aug 11-12                     | Professional Development                | Aug 15    | Professional Dev/Meet and Greet 3:00-6:00 PM |
| Aug 16                        | Teacher Work Day                        | Aug 17    | First Day of School                          |
| Sep 5                         | No School - Labor Day                   | Oct 10-11 | Parent/Teacher Conferences 4:00-7:00 PM      |
| Oct 13, 14, 17                | No School - Fall Break                  | Nov 8     | No School - Election Day                     |
| Nov 21-25                     | No School - Thanksgiving Break          | Dec 21    | Last Day before Winter Break                 |
| Dec 22-23, Dec 26-30, Jan 2-3 | No School - Winter Break                | Jan 4     | No School - Teacher Work Day                 |
| Jan 5                         | Students Return to School               | Jan 16    | No School - MLK Day                          |
| Feb 17                        | No School - Professional Development    | Feb 20    | No School - President's Day/Online PD Comp   |
| March 7 and March 9           | Parent/Teacher Conferences 4:00-7:00 PM | March 10  | No School - Spring Break                     |
| March 13-17                   | No School - Spring Break                | April 7   | Snow Day                                     |
| May 5                         | Snow Day                                | May 12    | Snow Day                                     |
| May 18                        | Last Day of School                      | May 19    | Professional Development                     |

**Oklahoma State Department of Education  
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55 I007    HARRAH

|                                       |                                |
|---------------------------------------|--------------------------------|
| <b>Superintendent's Name</b>          | Paul Blessington               |
| <b>Superintendent's Email Address</b> | pblessington@harrahschools.com |
| <b>Superintendent's Phone</b>         | (405) 347-2820                 |

|  |    |
|--|----|
| <b>Do you participate in an Alternative Education Cooperative or Interlocal Cooperative for Alternative Education?</b> | No |
|--|----|

|   |    |
|---|----|
| <b>Is your district the Local Education Agency (LEA) for the Alternative Education Program?</b> | No |
|---|----|

**LEA of Alternative Education Cooperative or Interlocal Cooperative**

|                          |          |
|--------------------------|----------|
| <b>Allocation Amount</b> | 29702.45 |
|--------------------------|----------|

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**COOPERATIVE INFORMATION**

If you participate in an Alternative Education Cooperative, your member districts will be listed below:

| <b>County</b> | <b>District</b> | <b>District Name</b> | <b>Allocation</b>   |
|---------------|-----------------|----------------------|---------------------|
| 55            | I007            | HARRAH               | 29702.45            |
|               |                 |                      | <hr/> <b>#Error</b> |

**LEA PROGRAM INFORMATION**

|   |                                   |
|---|-----------------------------------|
| <b>1. Program Name</b>                    | Harrah Alternative School         |
| <b>2. Physical Address (Not a PO Box)</b> | 20370 Elm St.<br>Harrah, OK 73045 |
| <b>3. Director/Lead Teacher Name</b>      | David Hairell                     |
| <b>4. Contact Title</b>                   | High School Principal             |
| <b>5. Contact Telephone</b>               | 4053472108                        |
| <b>6. Contact Fax</b>                     | 4053472190                        |

**Oklahoma State Department of Education  
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|   |  |
|---|--|
| 7. Mailing Address (Street)   | 20370 Elm St                                 |
| 8. Mailing Address (City)   | Harrah                                       |
| 9. Mailing Address (Zip)  | 73045  |
| 10. Contact Email   | dhairell@harrahschools.com                   |
| 11. Length of Program   |  |
| Program runs 4 hours 12 minutes 5 days a week   | <input type="checkbox"/>                     |
| 756 hours in your school calendar   | <input type="checkbox"/>                     |
| Deregulation turned into Accreditation office date of submission  | <input checked="" type="checkbox"/>          |
| 12. Days Operating  | M-TH   |
| 13. Time Program Begins   | 03:30 --                                     |
| 14. Time Program Ends   | 06:45 --                                     |
| 15. Grade Levels Served   |  |
| Grade 7 <input type="checkbox"/>  | Grade 8 <input type="checkbox"/>             |
| Grade 9 <input checked="" type="checkbox"/>   | Grade 10 <input checked="" type="checkbox"/> |
| Grade 11 <input checked="" type="checkbox"/>  | Grade 12 <input checked="" type="checkbox"/> |
| 16. How many students are being served each day?  | 20   |
| 16 A. If serving less than 10 students and not cooping have you completed a Statutory Waiver/Deregulation Application for Alternative Education? (Due Oct 1)  | --   |
| 17. Of the above number, how many students attend a Career Technology Center?   | 0  |
| 18. How many Alternative Education students take classes at the traditional school in addition to their classes in the Alternative Education Academy Program? | 0  |
| 19. How many Alternative Education students are concurrently enrolled in college or university courses?   | 0  |

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**TEACHER INFORMATION**

|   |                           |
|---|---------------------------|
| 20. Teacher Name  | Keri Swyden               |
| 21. Email Address   | kswyden@harrahschools.com |
| 22. Years of experience   | 22                        |
| 23. Degree Held   | BS                        |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 3                         |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 40.85                     |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                       |
| 27. Teacher Certification Number  | 210234                    |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                        |

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|   |                               |
|---|-------------------------------|
| 20. Teacher Name  | Steve Cunningham              |
| 21. Email Address   | scunningham@harrahschools.com |
| 22. Years of experience   | 17                            |
| 23. Degree Held   | M.Ed                          |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 3                             |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 39.41                         |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                           |
| 27. Teacher Certification Number  | 221773                        |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                            |

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**Oklahoma State Department of Education  
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|   |                            |
|---|----------------------------|
| 20. Teacher Name  | Teresa Winings             |
| 21. Email Address   | twinings@harrahschools.com |
| 22. Years of experience   | 21                         |
| 23. Degree Held   | M.Ed                       |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 20                         |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 39.1                       |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                        |
| 27. Teacher Certification Number  | 212939                     |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                         |

---

|   |                                |
|---|--------------------------------|
| 20. Teacher Name  | Renee Blessington              |
| 21. Email Address   | rblessington@harrahschools.com |
| 22. Years of experience   | 16                             |
| 23. Degree Held   | BS                             |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 6                              |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 38.07                          |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                            |
| 27. Teacher Certification Number  | 223499                         |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                             |

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|                  |               |
|------------------|---------------|
| 20. Teacher Name | Justin Harkey |
|------------------|---------------|

**Oklahoma State Department of Education  
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|   |                           |
|---|---------------------------|
| 21. Email Address   | jharkey@harrahschools.com |
| 22. Years of experience   | >25                       |
| 23. Degree Held   | BA                        |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 3                         |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 39.41                     |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                       |
| 27. Teacher Certification Number  | 187628                    |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                        |

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|   |                             |
|---|-----------------------------|
| 20. Teacher Name  | Rose Shimanek               |
| 21. Email Address   | rshimanek@harrahschools.com |
| 22. Years of experience   | 18                          |
| 23. Degree Held   | M.Ed                        |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 3                           |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 39.41                       |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                         |
| 27. Teacher Certification Number  | 230062                      |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                          |

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|                         |                         |
|-------------------------|-------------------------|
| 20. Teacher Name        | Haley Terry             |
| 21. Email Address       | herry@harrahschools.com |
| 22. Years of experience | 3                       |

**Oklahoma State Department of Education  
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|   |        |
|---|--------|
| 23. Degree Held   | BS     |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 3      |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 30     |
| 26. Has a criminal record search been conducted on this teacher?  | Yes    |
| 27. Teacher Certification Number  | 441785 |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No     |

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**ADMINISTRATOR/COUNSELOR INFORMATION**

|   |   |
|---|---|
|   | Counselor Type  |
| 29. Administrator or Counselor Name                                       | David Hairrell  |
| 30. Email address   | dhairrell@harrahschools.com                                   |
| 31. Documented duties performed in the Alternative Education Program      | Administrator who oversees the alternative education program. |
| 32. Number of hours per week served in the Alternative Education Program. | 8   |
| 33. Is this counselor a certified school guidance counselor?              | --  |
| 34. Salary and benefits   | 20  |
| 35. In what capacity does this individual serve?                          | Administrator   |

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**Oklahoma State Department of Education  
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|  |  |
|--|--|
| <b>29. Administrator or Counselor Name</b>                                       | Ryan Smith   |
| <b>30. Email address</b>   | rsmith@harrahschools.com                                     |
| <b>31. Documented duties performed in the Alternative Education Program</b>      | Administrator who oversees the alternative education program |
| <b>32. Number of hours per week served in the Alternative Education Program.</b> | 8  |
| <b>33. Is this counselor a certified school guidance counselor?</b>              | --   |
| <b>34. Salary and benefits</b>   | 20   |
| <b>35. In what capacity does this individual serve?</b>                          | Administrator  |

---

|  |  |
|--|--|
| <b>29. Administrator or Counselor Name</b>                                       | Daniel McComb  |
| <b>30. Email address</b>   | dmccomb@harrahschools.com                                    |
| <b>31. Documented duties performed in the Alternative Education Program</b>      | Administrator who oversees the alternative education program |
| <b>32. Number of hours per week served in the Alternative Education Program.</b> | 8  |
| <b>33. Is this counselor a certified school guidance counselor?</b>              | --   |
| <b>34. Salary and benefits</b>   | 20   |
| <b>35. In what capacity does this individual serve?</b>                          | Administrator  |

---

|  |  |
|--|--|
| <b>29. Administrator or Counselor Name</b>                                       | Tiffany Thompson   |
| <b>30. Email address</b>   | tthompson@harrahschools.com                                  |
| <b>31. Documented duties performed in the Alternative Education Program</b>      | Administrator who oversees the alternative education program |
| <b>32. Number of hours per week served in the Alternative Education Program.</b> | 8  |
| <b>33. Is this counselor a certified school guidance counselor?</b>              | --   |
| <b>34. Salary and benefits</b>   | 20   |
| <b>35. In what capacity does this individual serve?</b>                          | Administrator  |

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**Oklahoma State Department of Education  
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|  |  |
|--|--|
| <b>29. Administrator or Counselor Name</b>                                       | Amber Parsons                            |
| <b>30. Email address</b>   | aparsons@harrahschools.com               |
| <b>31. Documented duties performed in the Alternative Education Program</b>      | Provides counseling services to students |
| <b>32. Number of hours per week served in the Alternative Education Program.</b> | 4  |
| <b>33. Is this counselor a certified school guidance counselor?</b>              | School Guidance Counselor                |
| <b>34. Salary and benefits</b>   | 20                                       |
| <b>35. In what capacity does this individual serve?</b>                          | Counselor                                |

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|  |  |
|--|--|
| <b>29. Administrator or Counselor Name</b>                                       | Sherie Mitchell                          |
| <b>30. Email address</b>   | smitchell@harrahschools.com              |
| <b>31. Documented duties performed in the Alternative Education Program</b>      | Provides counseling services to students |
| <b>32. Number of hours per week served in the Alternative Education Program.</b> | 4  |
| <b>33. Is this counselor a certified school guidance counselor?</b>              | School Guidance Counselor                |
| <b>34. Salary and benefits</b>   | 20                                       |
| <b>35. In what capacity does this individual serve?</b>                          | Counselor                                |

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**Oklahoma State Department of Education  
Districtwide Alternative Education Implementation Plan Report  
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**COLLABORATIVE AGENCY INFORMATION**

|                              |   |
|------------------------------|---|
| <b>36. Agency Name</b>       | Tri-City Youth and Family Counseling Center |
| <b>37. Contact Name</b>      | Mary Gates                                  |
| <b>38. Phone</b>             | 4053908131                                  |
| <b>39. Email Address</b>     | frontdesk@tricityyfc.org                    |
| <b>40. Services Provided</b> | extended counseling services                |

|  |        |
|--|--------|
| <b>41. When are the services provided?</b> | weekly |
|--|--------|

---

|                              |                           |
|------------------------------|---------------------------|
| <b>36. Agency Name</b>       | Oklahoma State Extension  |
| <b>37. Contact Name</b>      | Della Pickens             |
| <b>38. Phone</b>             | 4052053487                |
| <b>39. Email Address</b>     | della.pickens@okstate.edu |
| <b>40. Services Provided</b> | Life Skills               |

|  |        |
|--|--------|
| <b>41. When are the services provided?</b> | Weekly |
|--|--------|

---

**42. Check all that apply to the district's intake and screening process.**

|  |                                     |
|--|-------------------------------------|
| Approved intake form   | <input checked="" type="checkbox"/> |
| At Risk Indicator  | <input checked="" type="checkbox"/> |
| Parent/guardian present                                      | <input checked="" type="checkbox"/> |
| Teacher from the traditional school                          | <input checked="" type="checkbox"/> |
| Administrator from the traditional school                    | <input checked="" type="checkbox"/> |
| Administrator from the alternative program (when applicable) | <input checked="" type="checkbox"/> |
| Individualized Education Plan (IEP) Change of Placement      | <input checked="" type="checkbox"/> |
| Counselor present  | <input checked="" type="checkbox"/> |
| Cumulative folder  | <input checked="" type="checkbox"/> |
| Student present  | <input checked="" type="checkbox"/> |
| Student transcript   | <input checked="" type="checkbox"/> |
| Written graduation plan for each student                     | <input checked="" type="checkbox"/> |
| Official referral  | <input checked="" type="checkbox"/> |

**Oklahoma State Department of Education  
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**43. How often are students allowed to enroll in the Alternative Education Program? Check all that apply.**

|                                  |                                     |
|----------------------------------|-------------------------------------|
| Daily                            | <input checked="" type="checkbox"/> |
| Once each week                   | <input checked="" type="checkbox"/> |
| Monthly only                     | <input checked="" type="checkbox"/> |
| Quarterly only                   | <input checked="" type="checkbox"/> |
| Semester only                    | <input checked="" type="checkbox"/> |
| Other interval. Please describe: | <input type="checkbox"/>            |

**44. Do you ensure that no indication will appear on the Alternative Education student's transcript that will eliminate the opportunity for high school credit to be accepted at institutions of higher education, career technology centers, and/or the United States Military?**

|     |                                     |
|-----|-------------------------------------|
| Yes | <input checked="" type="checkbox"/> |
|-----|-------------------------------------|

**45. List courses that are offered to students in the traditional school that are not available to the students in the Alternative Education Program.**

None - all courses are available to HALTS students

**46. Check all instructional strategies and activities that apply to your program. (Documented evidence required)**

|   |   |
|---|---|
| Lesson plans from teacher(s) at the traditional school  | <input type="checkbox"/>                      |
| Hands on art instruction  | <input checked="" type="checkbox"/>           |
| Cooperative learning  | <input checked="" type="checkbox"/>           |
| Distance learning. Please list the distance learning provider used in your Alternative Education Academy program. | <input checked="" type="checkbox"/> Edgenuity |
| Computer software. Please list computer software programs used in your Alternative Education Academy program.     | <input type="checkbox"/>                      |
| Teacher-developed curriculum and learning activities  | <input checked="" type="checkbox"/>           |
| Service-learning  | <input checked="" type="checkbox"/>           |
| Packaged curricula  | <input checked="" type="checkbox"/>           |
| Self-paced  | <input checked="" type="checkbox"/>           |
| Project-based learning  | <input type="checkbox"/>                      |
| Tutoring  | <input checked="" type="checkbox"/>           |
| Individualized instruction  | <input checked="" type="checkbox"/>           |
| Life skills instruction for all students  | <input checked="" type="checkbox"/>           |

**47. How many hours per week is counseling provided exclusively to Alternative Education students? (Documented evidence required)**

1-3

**Oklahoma State Department of Education  
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**48. Check the days counseling is provided exclusively to Alternative Education students.**

|           |                                     |
|-----------|-------------------------------------|
| Monday    | <input type="checkbox"/>            |
| Tuesday   | <input type="checkbox"/>            |
| Wednesday | <input checked="" type="checkbox"/> |
| Thursday  | <input type="checkbox"/>            |
| Friday    | <input type="checkbox"/>            |

**49. Who provides counseling services?**

School Guidance Counselors

**50. Indicate the provider's credentials. (Counselor must be certified by SDE or a mental health provider with appropriate licensure.)**

SDE certified

**51. Check all types of counseling strategies used in the Alternative Education Program. (Documented evidence required)**

|                              |                                     |
|------------------------------|-------------------------------------|
| Individual                   | <input checked="" type="checkbox"/> |
| Family                       | <input checked="" type="checkbox"/> |
| Academic                     | <input checked="" type="checkbox"/> |
| Conflict resolution          | <input checked="" type="checkbox"/> |
| Group                        | <input checked="" type="checkbox"/> |
| Teen parenting               | <input checked="" type="checkbox"/> |
| Career                       | <input checked="" type="checkbox"/> |
| Drug/alcohol/substance abuse | <input checked="" type="checkbox"/> |

**52. Which disciplines of art are taught to Alternative Education students? (Documented evidence required)**

|  |                                     |
|--|-------------------------------------|
| Vocal music                                  | <input type="checkbox"/>            |
| Instrumental music                           | <input type="checkbox"/>            |
| Integrated approach (hands-on)               | <input checked="" type="checkbox"/> |
| Performing arts (dance, drama, etc.)         | <input type="checkbox"/>            |
| Visual art (drawing, oil, photography, etc.) | <input checked="" type="checkbox"/> |

**53. Do students receive credit for the arts?**

|     |                                     |
|-----|-------------------------------------|
| Yes | <input checked="" type="checkbox"/> |
|-----|-------------------------------------|

**54. The district will support the Alternative Education personnel's attendance at professional development workshops, regional meetings, and seminars provided by the State Department of Education. (Documented evidence required)**

|     |                                     |
|-----|-------------------------------------|
| Yes | <input checked="" type="checkbox"/> |
|-----|-------------------------------------|

**Oklahoma State Department of Education  
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**55. Students in the Alternative Education Program, who otherwise meet all participation requirements, are allowed to participate in vocational programs and extracurricular activities, including but not limited to athletics, band, and clubs.**

Yes ☒

**56. How many Alternative Education senior students participated in the regular commencement exercises last school year?**

1-10

**57. How many Alternative Education students were reported on your district's annual Student Dropout Report for the 2020-2021 school year?**

2

**58. Will the Alternative Education Program be operational and ready to serve students on the 1st of September?**

Yes ☒

**59. Are materials and equipment purchased with revenue received for the Alternative Education Program made available exclusively to the Alternative Education students during the hours that the Alternative Education Program is operating?**

Yes ☒

**60. Is the Alternative Education Program site readily ADA Compliant?**

Yes ☒

No ☐

**61. Does the Alternative Education Program regularly provide transportation to students or transportation accessible if needed?**

Yes ☒

No ☐

**62. Does the Alternative Education Program offer food service to students?**

Yes ☒

No ☐

**63. I understand in order to receive funding the evidence criteria review must be completed and students must be coded correctly in your district's student information system.**

Yes ☒

No ☐

**Oklahoma State Department of Education  
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**ESTIMATED BUDGET PROGRAM REPORT**

FY 2023 ESTIMATED BUDGET - STATEWIDE ALTERNATIVE EDUCATION

District Name: HARRAH

County Name: OKLAHOMA

Please select the choice below that reflects your program structure:

FY 2023 Allocation (Project 388): 29702.45

☒ Single-District Program    ☐ Cooperative Program    ☐ Interlocal Cooperative (LLC) Program

(Single-District and ILC Programs should reflect all expenditures in Fund 11. Cooperative Programs should reflect all expenditures in Fund 12.)

PLEASE NOTE: Alternative Education Academy Program expenditures should be coded to Program Code 430, Project Code 388, and the Local District's Assigned Project Code for Alternative Education expenses that exceed the Allocation Amount.

Please list your Local District's Alternative Education Project Code: 388

FUNCTION CODES

| OBJECT CODES                    | Instruction 1000 | Testing/Guidance<br>2120 | Curriculum<br>Training 2210 | Secretary 2300 | Special Area<br>Administ. 2330 | Operation of<br>Maint. 2620 | Equipment/<br>Maint. 2640 | Security 2660 | Transp. 2720 | Special Area<br>Adm. Train.<br>2573 | Other       | TOTAL OF ALL<br>DISTRICT EXPENSES<br>FOR ALTERNATIVE<br>EDUCATION |
|---------------------------------|------------------|--------------------------|-----------------------------|----------------|--------------------------------|-----------------------------|---------------------------|---------------|--------------|-------------------------------------|-------------|---|
| 100 Salaries                    | 22,000.00        | 0.00                     | 0.00                        | 0.00           | 0.00                           | 0.00                        | 0.00                      | 0.00          | 0.00         | 0.00                                | 0.00        | 22,000.00   |
| 200 Benefits                    | 7,702.45         | 0.00                     | 0.00                        | 0.00           | 0.00                           | 0.00                        | 0.00                      | 0.00          | 0.00         | 0.00                                | 0.00        | 7,702.45  |
| 300 Contract<br>Prof.Serv       | 0.00             | 0.00                     | 0.00                        | 0.00           | 0.00                           | 0.00                        | 0.00                      | 0.00          | 0.00         | 0.00                                | 0.00        | 0.00  |
| 400 Property<br>Services        | 0.00             | 0.00                     | 0.00                        | 0.00           | 0.00                           | 0.00                        | 0.00                      | 0.00          | 0.00         | 0.00                                | 0.00        | 0.00  |
| 500 Travel                      | 0.00             | 0.00                     | 0.00                        | 0.00           | 0.00                           | 0.00                        | 0.00                      | 0.00          | 0.00         | 0.00                                | 0.00        | 0.00  |
| 560-Transp.<br>Student Tuition  | 0.00             | 0.00                     | 0.00                        | 0.00           | 0.00                           | 0.00                        | 0.00                      | 0.00          | 0.00         | 0.00                                | 0.00        | 0.00  |
| 600-Supp. &<br>Mater. < \$2,500 | 0.00             | 0.00                     | 0.00                        | 0.00           | 0.00                           | 0.00                        | 0.00                      | 0.00          | 0.00         | 0.00                                | 0.00        | 0.00  |
| 650 Furniture                   | 0.00             | 0.00                     | 0.00                        | 0.00           | 0.00                           | 0.00                        | 0.00                      | 0.00          | 0.00         | 0.00                                | 0.00        | 0.00  |
| 700 Property ><br>\$2,500       | 0.00             | 0.00                     | 0.00                        | 0.00           | 0.00                           | 0.00                        | 0.00                      | 0.00          | 0.00         | 0.00                                | 0.00        | 0.00  |
| 800 Other/<br>Registration      | 0.00             | 0.00                     | 0.00                        | 0.00           | 0.00                           | 0.00                        | 0.00                      | 0.00          | 0.00         | 0.00                                | 0.00        | 0.00  |
| <b>TOTAL</b>                    | <b>29,702.45</b> | <b>0.00</b>              | <b>0.00</b>                 | <b>0.00</b>    | <b>0.00</b>                    | <b>0.00</b>                 | <b>0.00</b>               | <b>0.00</b>   | <b>0.00</b>  | <b>0.00</b>                         | <b>0.00</b> | <b>29,702.45</b>  |

Printed On: 8/25/2022 12:05:08 PM

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# Harrah Public Schools

"DISTRICT OF CHAMPIONS"  
BOARD OF EDUCATION OFFICE  
20670 WALKER  
HARRAH, OKLAHOMA 73045  
(405) 347-2820

August 8, 2022

Oklahoma State Department of Education  
Office of Accreditation  
2500 North Lincoln Boulevard  
Oklahoma City, Oklahoma 73105

To Whom It May Concern:

I am requesting approval for the School Site Deregulation regarding OAC 210:35-29-2 and OAC 210:3-3-46 filed by Harrah Public Schools for the Harrah Alternative School. Approval of the deregulation will allow the Harrah Alternative School to be in session four days each week, four hours, and fifteen minutes daily. Days of operation will match the regular school calendar.

Please contact me at 405-347-2819 if you have any questions.

Sincerely,

Paul Blessington  
Superintendent

The Harrah Board of Education does not discriminate on the basis of disability, race, color, religion, national origin, sex, age, or veteran status.

Virginia Smith Elem.  
20227 NE 10th  
Harrah, OK 73045

Clara Reynolds Elem.  
755 Harrison St.  
Harrah, OK 73045

Russell Babb Elem.  
20901 NE 10th  
Harrah, OK 73045

Harrah Middle School  
1480 N. Dobbs  
Harrah, OK 73045

Harrah High School  
20370 Elm Street  
Harrah, OK 73045



**SCHOOL SITE STATUTORY WAIVER/DEREGULATION APPLICATION**  
**for 20 22 - 20 25 school year**

Okmulgee  
COUNTY

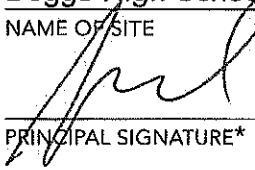
Beggs  
SCHOOL DISTRICT

1201 W 9th St  
SCHOOL DISTRICT MAILING ADDRESS

Beggs  
CITY

74421  
ZIP CODE

Beggs High School-Demon Academy  
NAME OF SITE

  
PRINCIPAL SIGNATURE\*

08/10/2022  
DATE

PRINCIPAL SIGNATURE\*


DATE

PRINCIPAL SIGNATURE\*

DATE

Shawn Tennyson  
SUPERINTENDENT NAME (PLEASE PRINT)

stennyson@beggs.k12.ok.us  
SUPERINTENDENT E-MAIL ADDRESS

  
SUPERINTENDENT SIGNATURE\*

08/10/2022  
DATE

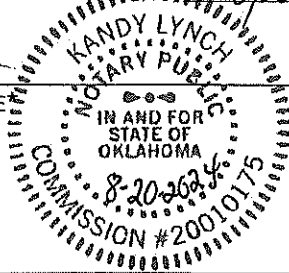
I hereby certify that this waiver/deregulation application was approved by our local board of education at the meeting on 8/10, 20 22

  
BOARD PRESIDENT SIGNATURE

NOTARY SEAL →

  
NOTARY

8-20-2024  
COMMISSION EXPIRATION DATE



8-10-2022  
DATE

Statute/Oklahoma Administrative Code to be Waived:  
(specify statute or OAC (deregulation) number: (see instructions))

\*Original signatures are required. The attached questionnaire must be answered to process.\*\*

**THE WAIVER/DEREGUALTION IS REQUESTED FOR:**

\_\_\_\_\_ One Year Only  
☒ Three Years\*

\*Please see instruction page for additional requirements for a three year request

**SDE USE ONLY**

PROJECT YEARS  
\_\_\_\_\_ of \_\_\_\_\_

**ENROLLMENT**

\_\_\_\_\_ High School  
\_\_\_\_\_ Jr./Middle High  
\_\_\_\_\_ Elementary  
0 District Total

8-10-22  
DATE RECEIVED

70 O.S. \_\_\_\_\_

OAC 210-29-2

Abbreviated Days  
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.

Standard OAC Code 210:35-29-2

Abbreviated school day for alternative education.

The distance from the nearest COOP is not near our town which causes several challenges for our students to attend school that is not near us. Transportation to and from a distant school is not ideal or within our students best interest which could cause increase of student drop-out and distance of connection with community and their peers.

- 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.

1. Increase attendance for students by reducing the number of hours in which to complete credit requirements.
2. Reduce the drop-out rate by two percent.
3. Allows students who are in service learning or careers more hours in which to complete credit requirements.
4. Allows students to work within their communities through service learning projects. This increases visibility of the program.
5. Students enrolled in program are best served by our student-teacher ratios due to their "at task" status. These students are at greater risk of not completing high school if placed in traditional school setting or placed in a COOP program that is not located within their own town.

- 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 have not participated in an alternative education COOP in many years. We have been awarded this waiver for several year and the educational impact to our district has resulted in student achievement, student graduation, student career guidance, positive social interactions, counseling services for students, student enrichment and connection with community. We expect our students to complete the desired number of credits in a timely fashion while enrolled in the alternative education program. Students will receive individual and group counseling, life skills guidance and trainings, participate in the arts and other extra-curricular activities.

- D. Timeline: Please submit class schedule, calendars, assessment forms and other attachments as necessary.

Our Demon Academy (Alternative Education Program) follows the Beggs Public School Calendar. Demon Academy provides instruction with four hours and fifteen minute days, four days a week. The class daily bell schedule is as follows:

1st hr- 8:00-8:50  
2nd hr- 8:55-9:45  
3rd hr- 9:50-10:40  
4th hr- 10:45-11:30  
LUNCH- 11:30-11:45  
5th hr- 11:45-12:30

- 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.

Our district will be negatively impacted if these students drop out or if they are forced to attend the traditional school setting or a COOP that is not located in or near our town. Funds would be reallocated to pay our Alternative Education teachers and director and to supplement the cost of our curriculum. We will also use the funds to pay everyday costs to run the program.

- 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.

Students will be constantly monitored to ensure adequate progression in their classes in order to meet all graduation requirements. We will also monitor attendance, participation in counseling groups and in life skills training. Students and parents will complete surveys throughout the school year in order to ensure they are staying on track and to offer feedback to improve the program. ACT scores, Pre ACT scores, semester exams and report cards will be used to identify deficiencies and areas of weakness as well as strengths that we can continue to build on.

\*\* You will be contacted if more information is needed to process this request.

**Oklahoma State Department of Education  
Districtwide Alternative Education Implementation Plan Report  
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56 1004    BEGGS

**Superintendent's Name**                      Shawn Tennyson  
**Superintendent's Email Address**        stennyson@beggs.k12.ok.us  
**Superintendent's Phone**                (918) 267-36280220

**Do you participate in an Alternative  
Education Cooperative or Interlocal  
Cooperative for Alternative  
Education?**                                      No

**Is your district the Local Education  
Agency (LEA) for the Alternative  
Education Program?**                              No

**LEA of Alternative Education  
Cooperative or Interlocal Cooperative**

**Allocation Amount**                              11234.88

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**COOPERATIVE INFORMATION**

If you participate in an Alternative Education Cooperative, your member districts will be listed below:

| <b>County</b> | <b>District</b> | <b>District Name</b> | <b>Allocation</b>   |
|---------------|-----------------|----------------------|---------------------|
| 56            | 1004            | BEGGS                | 11234.88            |
|               |                 |                      | <hr/> <b>#Error</b> |

**LEA PROGRAM INFORMATION**

**1. Program Name**                              Demon Academy  
**2. Physical Address (Not a PO Box)**        1201 W 9th St.  
    Beggs, Ok  
    74421  
**3. Director/Lead Teacher Name**              Kandi Stanton  
**4. Contact Title**                                Demon Academy Director  
**5. Contact Telephone**                        9182673625  
**6. Contact Fax**

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|   |  |
|---|--|
| 7. Mailing Address (Street)   | 1201 W 9th St                                |
| 8. Mailing Address (City)   | Beggs  |
| 9. Mailing Address (Zip)  | 74421  |
| 10. Contact Email   | kstanton@beggs.k12.ok.us                     |
| 11. Length of Program   |  |
| Program runs 4 hours 12 minutes 5 days a week   | <input type="checkbox"/>                     |
| 756 hours in your school calendar   | <input type="checkbox"/>                     |
| Deregulation turned into Accreditation office date of submission  | <input checked="" type="checkbox"/>          |
| 12. Days Operating  | M-TH   |
| 13. Time Program Begins   | 08:00 AM                                     |
| 14. Time Program Ends   | 12:30 PM                                     |
| 15. Grade Levels Served   |  |
| Grade 7 <input type="checkbox"/>  | Grade 8 <input checked="" type="checkbox"/>  |
| Grade 9 <input checked="" type="checkbox"/>   | Grade 10 <input checked="" type="checkbox"/> |
| Grade 11 <input checked="" type="checkbox"/>  | Grade 12 <input checked="" type="checkbox"/> |
| 16. How many students are being served each day?  | 8  |
| 16 A. If serving less than 10 students and not cooping have you completed a Statutory Waiver/Deregulation Application for Alternative Education? (Due Oct 1)  | Yes  |
| 17. Of the above number, how many students attend a Career Technology Center?   | 1  |
| 18. How many Alternative Education students take classes at the traditional school in addition to their classes in the Alternative Education Academy Program? | 1  |
| 19. How many Alternative Education students are concurrently enrolled in college or university courses?   | 0  |

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**TEACHER INFORMATION**

|   |                            |
|---|----------------------------|
| 20. Teacher Name  | GERARD ALEXANDER           |
| 21. Email Address   | GALEXANDER@BEGGS.K12.OK.US |
| 22. Years of experience   | 25                         |
| 23. Degree Held   | BA                         |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 18                         |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | 4793.46                    |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                        |
| 27. Teacher Certification Number  | 15647                      |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | Yes                        |

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|   |                         |
|---|-------------------------|
| 20. Teacher Name  | KRISTEN HUDSON          |
| 21. Email Address   | KHUDSON@BEGGS.K12.OK.US |
| 22. Years of experience   | 16                      |
| 23. Degree Held   | BS                      |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 4                       |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | \$325.80                |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                     |
| 27. Teacher Certification Number  | 218845                  |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                      |

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|   |                            |
|---|----------------------------|
| 20. Teacher Name  | RUSSEL FEDERICK            |
| 21. Email Address   | RFREDERICK@BEGGS.K12.OK.US |
| 22. Years of experience   | --                         |
| 23. Degree Held   | --                         |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 4                          |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | \$345.60                   |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                        |
| 27. Teacher Certification Number  |                            |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                         |

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|   |                         |
|---|-------------------------|
| 20. Teacher Name  | NICHOLE CHESSER         |
| 21. Email Address   | NCHESSE@BEGGS.K12.OK.US |
| 22. Years of experience   | 8                       |
| 23. Degree Held   | BS                      |
| 24. Number of hours per week served in the Alternative Education Academy Program.   | 4                       |
| 25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program) | \$297.00                |
| 26. Has a criminal record search been conducted on this teacher?  | Yes                     |
| 27. Teacher Certification Number  | 414289                  |
| 28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2  | No                      |

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**ADMINISTRATOR/COUNSELOR INFORMATION**

|   |  |
|---|--|
|   | Counselor Type   |
| 29. Administrator or Counselor Name                                       | KANDI STANTON  |
| 30. Email address   | KSTANTON@BEGGS.K12.OK.US   |
| 31. Documented duties performed in the Alternative Education Program      | CREATE AND ENFORCE POLICIES AND PROCEDURES<br>CONDUCT INTAKES FOR STUDENTS<br>ENROLL STUDENTS<br>ATTEND MEETINGS ADN PD<br>TRANSCRIPT GRADES AND MONITOR GRADUATION REQUIREMENTS |
| 32. Number of hours per week served in the Alternative Education Program. | 15   |
| 33. Is this counselor a certified school guidance counselor?              | --   |
| 34. Salary and benefits   | ADMINIST   |
| 35. In what capacity does this individual serve?                          | Administrator  |

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**COLLABORATIVE AGENCY INFORMATION**

|                                     |                          |
|-------------------------------------|--------------------------|
| 36. Agency Name                     | N/A                      |
| 37. Contact Name                    | N/A                      |
| 38. Phone                           | N/A                      |
| 39. Email Address                   | KSTANTON@BEGGS.K12.OK.US |
| 40. Services Provided               | N/A                      |
| 41. When are the services provided? | N/A                      |

---

**42. Check all that apply to the district's intake and screening process.**

|                                     |                                     |
|-------------------------------------|-------------------------------------|
| Approved intake form                | <input checked="" type="checkbox"/> |
| At Risk Indicator                   | <input checked="" type="checkbox"/> |
| Parent/guardian present             | <input checked="" type="checkbox"/> |
| Teacher from the traditional school | <input checked="" type="checkbox"/> |



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|  |                                     |
|--|-------------------------------------|
| Administrator from the traditional school                    | <input checked="" type="checkbox"/> |
| Administrator from the alternative program (when applicable) | <input checked="" type="checkbox"/> |
| Individualized Education Plan (IEP) Change of Placement      | <input checked="" type="checkbox"/> |
| Counselor present  | <input checked="" type="checkbox"/> |
| Cumulative folder  | <input checked="" type="checkbox"/> |
| Student present  | <input checked="" type="checkbox"/> |
| Student transcript   | <input checked="" type="checkbox"/> |
| Written graduation plan for each student                     | <input checked="" type="checkbox"/> |
| Official referral  | <input type="checkbox"/>            |

**43. How often are students allowed to enroll in the Alternative Education Program? Check all that apply.**

|                                  |                                     |
|----------------------------------|-------------------------------------|
| Daily                            | <input checked="" type="checkbox"/> |
| Once each week                   | <input type="checkbox"/>            |
| Monthly only                     | <input type="checkbox"/>            |
| Quarterly only                   | <input type="checkbox"/>            |
| Semester only                    | <input type="checkbox"/>            |
| Other interval. Please describe: | <input type="checkbox"/>            |

**44. Do you ensure that no indication will appear on the Alternative Education student's transcript that will eliminate the opportunity for high school credit to be accepted at institutions of higher education, career technology centers, and/or the United States Military?**

|     |                                     |
|-----|-------------------------------------|
| Yes | <input checked="" type="checkbox"/> |
|-----|-------------------------------------|

**45. List courses that are offered to students in the traditional school that are not available to the students in the Alternative Education Program.**

**46. Check all instructional strategies and activities that apply to your program. (Documented evidence required)**

|   |   |
|---|---|
| Lesson plans from teacher(s) at the traditional school  | <input checked="" type="checkbox"/>             |
| Hands on art instruction  | <input checked="" type="checkbox"/>             |
| Cooperative learning  | <input checked="" type="checkbox"/>             |
| Distance learning. Please list the distance learning provider used in your Alternative Education Academy program. | <input checked="" type="checkbox"/> ODYSSEYWARE |
| Computer software. Please list computer software programs used in your Alternative Education Academy program.     | <input type="checkbox"/>                        |
| Teacher-developed curriculum and learning activities  | <input checked="" type="checkbox"/>             |
| Service-learning  | <input checked="" type="checkbox"/>             |

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|  |                                     |
|--|-------------------------------------|
| Packaged curricula                       | <input type="checkbox"/>            |
| Self-paced                               | <input checked="" type="checkbox"/> |
| Project-based learning                   | <input checked="" type="checkbox"/> |
| Tutoring                                 | <input checked="" type="checkbox"/> |
| Individualized instruction               | <input checked="" type="checkbox"/> |
| Life skills instruction for all students | <input checked="" type="checkbox"/> |

**47. How many hours per week is counseling provided exclusively to Alternative Education students? (Documented evidence required)**

1-3

**48. Check the days counseling is provided exclusively to Alternative Education students.**

|           |                                     |
|-----------|-------------------------------------|
| Monday    | <input type="checkbox"/>            |
| Tuesday   | <input type="checkbox"/>            |
| Wednesday | <input checked="" type="checkbox"/> |
| Thursday  | <input type="checkbox"/>            |
| Friday    | <input type="checkbox"/>            |

**49. Who provides counseling services?**

MECHELLE CASH

**50. Indicate the provider's credentials. (Counselor must be certified by SDE or a mental health provider with appropriate licensure.)**

LPC

**51. Check all types of counseling strategies used in the Alternative Education Program. (Documented evidence required)**

|                              |                                     |
|------------------------------|-------------------------------------|
| Individual                   | <input checked="" type="checkbox"/> |
| Family                       | <input type="checkbox"/>            |
| Academic                     | <input checked="" type="checkbox"/> |
| Conflict resolution          | <input checked="" type="checkbox"/> |
| Group                        | <input checked="" type="checkbox"/> |
| Teen parenting               | <input checked="" type="checkbox"/> |
| Career                       | <input checked="" type="checkbox"/> |
| Drug/alcohol/substance abuse | <input checked="" type="checkbox"/> |

**52. Which disciplines of art are taught to Alternative Education students? (Documented evidence required)**

|                    |                          |
|--------------------|--------------------------|
| Vocal music        | <input type="checkbox"/> |
| Instrumental music | <input type="checkbox"/> |

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Integrated approach (hands-on) ☒

Performing arts (dance, drama, etc.) ☐

Visual art (drawing, oil, photography, etc.) ☒

**53. Do students receive credit for the arts?**

Yes ☒

**54. The district will support the Alternative Education personnel's attendance at professional development workshops, regional meetings, and seminars provided by the State Department of Education. (Documented evidence required)**

Yes ☒

**55. Students in the Alternative Education Program, who otherwise meet all participation requirements, are allowed to participate in vocational programs and extracurricular activities, including but not limited to athletics, band, and clubs.**

Yes ☒

**56. How many Alternative Education senior students participated in the regular commencement exercises last school year?**

1-10

**57. How many Alternative Education students were reported on your district's annual Student Dropout Report for the 2020-2021 school year?**

0

**58. Will the Alternative Education Program be operational and ready to serve students on the 1st of September?**

Yes ☒

**59. Are materials and equipment purchased with revenue received for the Alternative Education Program made available exclusively to the Alternative Education students during the hours that the Alternative Education Program is operating?**

Yes ☒

**60. Is the Alternative Education Program site readily ADA Compliant?**

Yes ☒

No ☐

**61. Does the Alternative Education Program regularly provide transportation to students or transportation accessible if needed?**

Yes ☒

No ☐

**62. Does the Alternative Education Program offer food service to students?**

Yes ☒

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No ☐

**63. I understand in order to receive funding the evidence criteria review must be completed and students must be coded correctly in your district's student information system.**

Yes ☒

No ☐



# Beggs Public Schools

Home of the Golden Demons

Shawn Tennyson, Superintendent  
Rick Martin, President  
Autumn Caldwell, Principal  
Kandi Stanton, Alternative Education Director

Beggs Public School  
Independent School District No. 4  
1201 W. 9th Street  
Beggs, Ok 74421-0690  
918-267-3625

Oklahoma State Department of Education:

Accreditation Section:

Beggs Public School would like to request a deregulation for our Alternative Education Demon Academy. This request is based on OAC 210:35-29-2 Abbreviated day for Alternative Education. This request has been approved by the school board in August 2022.

Thank you for your consideration.

Sincerely,

Shawn Tennyson  
Superintendent, Beggs Public Schools