

## Alternative Education Abbreviated Day Deregulation

A school district that chooses an Alternative Education abbreviated day scheduling approach for its alternative education program must notify the State Board of Education by **September 1** of each applicable school year.

### Oklahoma State Statute

[70 O.S. § 1210.567](#) Abbreviated Day Schedule for Alternative School

### Oklahoma Administrative Code:

[OAC 210:35-29-2](#) 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 twelve (12) minutes per day devoted to academic instruction for the locally approved school calendar; or
- A school day which may consist of less than four (4) hours and twelve (12) minutes per day devoted to academic instruction, provided that students in alternative education programs receive at least seven hundred fifty-six (756) hours of academic instruction per school year.

#### Section 1:

Submit a cover letter on school letterhead with the superintendent's signature with a brief explanation of the request for the deregulation.

#### Section 2:

Complete the deregulation form with signatures from the superintendent, board president signature, and notary.

#### Section 3:

Complete all questions in section 3 and add any supporting documentation.

**Section 2:**

School Year(s): 20\_\_ - 20\_\_

County: \_\_\_\_\_

School District: \_\_\_\_\_

School District Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

School Site Name: \_\_\_\_\_

Principal(s) Signature(s):

1. \_\_\_\_\_ Date: \_\_\_\_\_

2. \_\_\_\_\_ Date: \_\_\_\_\_

3. \_\_\_\_\_ Date: \_\_\_\_\_

Superintendent Name (Print): \_\_\_\_\_

Superintendent E-mail: \_\_\_\_\_

Superintendent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby certify that this Alternative Education abbreviated day deregulation application was approved by our local board of education at the meeting on \_\_\_\_\_.

Board President Signature: \_\_\_\_\_

Notary Seal: \_\_\_\_\_

Notary Date: \_\_\_\_\_

Commission Expiration Date: \_\_\_\_\_

**Section 3:**

1. Reason for the 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 deregulation was to be denied.
  
2. 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 year's alternative education audit.
  
3. Describe the method used to assess or evaluate the effectiveness of the plan for both staff and students (e.g., TLE, ACT scores, graduation rates, RSA data, School Report Card indicators) and explain the educational impact on the district, including effects on student performance levels and projected graduation rates.

**OSDE Official Use Only**

Date Received: \_\_\_\_\_

Recommended for Board Approval: \_\_\_\_\_ Not Recommended for Board Approval: \_\_\_\_\_

Board Meeting Date: \_\_\_\_\_

Approved: \_\_\_\_\_

Denied: \_\_\_\_\_

Date Sent to District: \_\_\_\_\_

Notes to District: \_\_\_\_\_