**RENEWAL APPLICATION FORM**

|  |
| --- |
| District Name:Click or tap here to enter text. |
| Date Waiver Was Previously Granted:Click or tap to enter a date. | Expiration Date of Current Waiver:Click or tap to enter a date. | Number Assigned to Previously Granted Waiver Application:Click or tap here to enter text. |
| School(s)/Program(s) to Which Current Waiver Applies:Click or tap here to enter text. |

**Original Application**

*District must select both of the following:*

[ ]  District attaches to this Renewal Application the letter from the Kentucky Department of Education granting the waiver District seeks to renew pursuant to KRS 156.161 (7) and 701 KAR 5:170.

[ ]  District attaches to this Renewal Application the complete waiver request application it previously filed that resulted in the waiver District seeks to renew pursuant to KRS 156.161 (7) and 701 KAR 5:170.

**Amendments to Original Application**

Since being granted the waiver(s) District seeks to renew with this application, has District sought any amendment(s) to the waiver(s) granted?

 *District must select only one of the following:*

[ ]  NO.

[ ]  YES. If District selects “YES,” it must list the numbers assigned to any application(s) for amendment:

 Click or tap here to enter text.

**Evidence of Improvement**

|  |
| --- |
| Describe the operational improvement of the school(s) or program(s) subject to the waiver District wishes to renew, the academic achievement of the students enrolled in the school(s) or program(s), comparison of those students with similar students across the state, and any other benefit the waiver has had on student academic achievement. Click or tap here to enter text. |
| List every attachment to this application District provides in support of its response above, including a brief description of how the attachment supports District’s response.Click or tap here to enter text.  |