(2)

Rev 8-5-14

ED-5496

12-4 sbw

Tennessee Department of Education
Employment Standards Waiver Application

Read and complete ALL sections of the application to ensure timely response.

Section 1 – General Information

Last Name (First, Middle, Last): JONES	*First Name* Danielle	*Middle Initial* S
Social Security #: [redacted]	*TN License#:* 000523626 ✓	*Expiration Date:* 8/31/2022 ✓
Area Code + Phone Number [redacted]	*Email Address:* [redacted]	
Certificate Type(s) Professional ✓	*Current Endorsement(s) Held* Elementary K-6 (499) ✓	
System Name: Fentress County	*System #:* 250 ✓	
School Name: York Elementary	*School #:* 0060 ✓	
School Year: 2014-15 ✓ / *Date of Hire:* 7/2/2007	*Date Educator Placed in Waiver Position:* 8/4/2014	
Subject(s) and Course Code(s) of Waiver Position to be Filled: Middle School ELA + S.S. 0701, 0712 ✓	*Endorsement(s) Needed for the Waiver Position:* 440 ✓	

Year of Waiver Request:
(Check One) ☒ 1st Year ✓ ☐ 2nd Year (passed tests and/or enrolled in program, required)
☐ 3rd Year (all tests passed and evidence of progress in coursework, required)

Section 2 – Recruiting and Staffing Information

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2014 DEC -2 AM 8:15
DEPT. OF EDUCATION
CERTIFICATION

Approval criteria checklist:

☐ The waiver is being requested to fill a vacant, high need position

☒ The waiver is being requested to fill a mission-critical position [core academic, non-instructional leader]

☐ The school district has engaged in thorough, responsible position-specific recruitment efforts to find appropriately endorsed candidates for the position for which a waiver is being requested AND has been unsuccessful in those efforts

☒ The educator being recommended for the waiver is the most qualified candidate for the position for which a waiver is being requested ✓

Section 3 – Plans to Obtain Proper Endorsement

Is applicant registered to take appropriate Praxis test(s): (Check one) ☐ Yes ☒ No	Praxis registration date :
Has applicant taken and passed appropriate Praxis test(s): (Check one) ☐ Yes ☒ No Score(s) ____ ____	Is applicant enrolled in a university/college program: (Check one) ☐ Yes ☒ No
Name of university/college program:	Number of program hours COMPLETED:

I hereby certify the information provided in this application is true and correct, and the district is in urgent need of a waiver.

Educator Name- Print Danielle Jones	*Educator Signature/Date* Danielle Jones Dec 2, 2014	
Human Resources Contact – Print Randy Clark	*Human Resources Contact – Email* clarkr2@k12tn.net ✓	*Human Resources Signature/Date* Randy Clark
Director of Schools Name – Print Mike Jones	*Director of Schools Signature/Date* Mike Jones	

Submit completed application to:
Tennessee Dept. of Education, Office of Educator Licensing 12th floor, 710 James Robertson Pkwy, Nashville TN 37243-0376

Section 4 – TO BE COMPLETED BY DEPARMENT OF EDUCATION

Teachers & Leaders Recommendation

☑ Approve ☐ Deny (See Comments Below)

Teachers & Leaders Name - Print	*Teachers & Leaders Signature/Date*
Jennifer Anderson	Jennifer M Anderson 12/12/14
Kevin Huffman, Commissioner of Education	*Kevin Huffman, Commissioner of Education Signature/Date* Kevin Huffman HK 1/2/15.
Additional Comments	

Employment Standards Waiver Application
Frequently Asked Questions

Question: **Who can apply for a waiver?**
Answer: Only school districts [not individual educators] may apply for waivers.

Question: **Are there any restrictions on the endorsements for which the system may acquire a waiver?**
Answer: Courses which conclude with an end-of-course exam for high school credit may not be taught on waivers.

Question: **Where do I locate the Subject and Course Code(s) assignment?**
Answer: The information can be found in the Correlations of Course & Endorsement Codes Document.
http://www.tn.gov/education/districts/correlations.shtml

Question: **When must my system apply for a waiver?**
Answer: A waiver must be requested and approved if an educator holding an Apprentice, Transitional, or Professional License is scheduled to teach more than one course or more than two sections of one course outside the area of endorsement.

Question: **What supplemental information or documents should we provide in order to strengthen this application?**
Answer: Evidence [original or photocopied documentation] that the educator for whom the waiver is being requested is actively pursuing or engaged in coursework to obtain the endorsement AND/OR registered to take the relevant Praxis exam.

Question: **How long is an approved waiver valid?**
Answer: One academic year [July 1 – June 30]. Waivers must be renewed each year and must include evidence of the applicant's progression toward the additional endorsement.

Question: **Where can I send this application?**
Answer: Please send completed application and supporting documentation to: Tennessee Department of Education, Office of Educator Licensing, 12th floor, 710 James Robertson Pkwy, Nashville TN 37243-0376. Completed applications can be faxed to (615) 532-1448 or emailed to Education.Licensing@tn.gov.

Question: **If the waiver application is denied, what should we do?**
Answer: The system should develop a plan to recruit an educator with the proper endorsement.

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