Louisiana Department of Education
End-of-Course Grade Waiver Request Form
Bulletin 741, *Louisiana Handbook for School Administrators* (approved by BESE October 2013)

December 2013
Administration

District Name and Contact Information*

*Provide contact information for a point of contact available during the holidays.

Date of application *(mm/dd/yyyy)*

District Code

District Name

District Test Coordinator

Superintendent

Telephone Number

Superintendent's Signature

E-mail address

Statement of Assurance

Fall Semester End Date:

We are requesting a waiver for one or more schools in the district. The waiver will allow the district and school to waive the requirement that the End-of-Course test be calculated into the student's final course grade. This waiver only applies to students who have completed all three sessions of one of the following EOC tests during the December 2013 Administration. (1) Algebra I, (2) Geometry, (3) English II, or (4) English III.

Please complete and attach the included spreadsheet, which includes district, school and student information.

Include a rationale for the district request

☐ The rationale above applies to all schools.

School Information

List the names of the schools for which this waiver applies.

Number of Schools

School Name | Rationale

School Name | Rationale

School Name | Rationale

School Name | Rationale

School Name | Rationale

School Name | Rationale

School Name | Rationale

Attach additional sheets if necessary.