

Application for Temporary Gifted Education Service Waiver

Introduction and Purpose

The Temporary Gifted Education Service Waiver application is designed to assist school districts in requesting temporary waivers for specific gifted education service requirements. This form must be completed and signed by the Superintendent or their designee and submitted to the Ohio Department of Education and Workforce at gifted@education.ohio.gov.

If approved, this waiver allows districts to address unique circumstances that may prevent it, for a limited period of time, from reaching full compliance with Ohio Administrative Code 3301-51-15. By providing detailed information about the waiver request, service settings, and a plan for compliance, districts can ensure that they continue to support the educational needs of gifted students while working towards full compliance with state regulations.

General
Date:
School Year:

District Information
District Name:
District IRN:

Contact Information
Name:
Role:
Email Address:

Service Setting Information
Grade Level(s):
Subject(s):
Building(s):
Class size/caseload:
District class size/caseload for corresponding subject(s) and grade level(s):
Cluster group size:
Cluster group identification area(s):

Service Setting for Waiver Request (Check all that apply)	Reason for Waiver Request (Check all that apply)
<input type="checkbox"/> Resource room/pull-out setting	<input type="checkbox"/> Class size exceeds maximum of 20 students who are gifted. <input type="checkbox"/> Gifted intervention specialist's caseload exceeds 80 students who are gifted.
<input type="checkbox"/> Co-teaching cluster group setting	<input type="checkbox"/> Cluster group is below the minimum of 3 students who are gifted. <input type="checkbox"/> Cluster group exceeds maximum of 20 students who are gifted. <input type="checkbox"/> Gifted intervention specialist's caseload exceeds 80 students who are gifted.
<input type="checkbox"/> Cluster group setting	<input type="checkbox"/> Cluster group is below the minimum of 3 students who are gifted. <input type="checkbox"/> Identification areas of students in the cluster group are not similar or related (Example: math and superior cognitive ability are considered related, so no waiver application would be necessary).

Waiver Rationale and Implementation Plan

Please include the following additional information when submitting the service waiver application.

1. A rationale for why the waiver is necessary.

2. A description of the implementation plan to bring services into full compliance for next school year (include action steps and timeline).

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District Assurances

- By checking this box, I assure each educator who is responsible for delivering the gifted education service(s) described in this waiver knows their responsibilities regarding Ohio Administrative Code 3301-51-15, the *Operating Standards for Identifying and Serving Students Who are Gifted*.

- By checking this box, I assure the district recognizes that approved Temporary Gifted Education Service Waiver is valid only for the approved time frame.

Superintendent or Designee Signature: _____