Innovative Education Pilot Program
2022-2023 Application Cover Page

DISTRICT/BUILDING INFORMATION
A public school application must come from the district level. An application from a parochial school that reports to a diocese must come from the diocese level.

IRN:_______________________  County:____________________

District Name: ________________________________________________________________

District Address: __________________________________________________________________________

Superintendent/Building Leader:______________________________________________________________

Who should the Ohio Department of Education contact with questions regarding the application? This person also will receive the official decision notice.

Name:__________________________________________________________________________________

Phone:_________________________________________________________________________________

Email Address:___________________________________________________________________________

SUBMISSION INFORMATION
1. Did the district/school apply for the Innovative Education Pilot Program in 2021? ________________

2. Did the district/school receive a waiver?___________________________________________________

3. Did the district/school submit an end-of-year report for its most recent Innovative Education Pilot Program initiative or waiver? ________________________________________________

4. Is this a districtwide request?
   • If not districtwide, please provide the building name(s) and IRN below.
   • Building Name(s):__________________________________________________________________
   • Building IRN(s):____________________________________________________________________

5. Does the district/school employ teachers under a collective bargaining agreement? ________________
   • If yes, please provide the written consent of the teachers’ employee representative.

PROJECT SUMMARY
The project summary should include the following:
1. A detailed description of the proposed Innovative Education Pilot Program.

2. Describe how the proposed program meets the definition of innovation. “Innovation” means a new, experimental or disruptive educational approach that is developed based on an identified need and seeks continuous improvement in student achievement or student growth. An innovative educational approach is not expected to be evidence based. However, it should be workable, and it must be tested and evaluated over time to gauge effectiveness. Include measurable outcomes, performance indicators and method of evaluation.

3. A description of the anticipated cost or savings of the Innovative Education Pilot Program.


5. A list of specific statutory provisions and/or rules for which an exemption request is made, including a specific rationale for each exemption request and specific time period for which each exemption is
6. The potential impact of the proposed Innovative Education Pilot Program on data reporting, student assessments, student learning, graduation requirements, compliance with federal law and/or any other areas that may be impacted.

7. A description of what will happen if the proposed pilot program fails.

8. A disclosure of whether the applicant currently is subject to any corrective action plan by the Department or State Board of Education.
Application Process

A. Timeline

<table>
<thead>
<tr>
<th>Application Materials Posted</th>
<th>January 24, 2022</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application Deadline</td>
<td>March 28, 2022 at 5 p.m.</td>
</tr>
<tr>
<td>Evaluation of Applications</td>
<td>March 29, 2022 through June 7, 2022</td>
</tr>
<tr>
<td>Notice of Exemption Approved/Not Approved</td>
<td>June 8, 2022</td>
</tr>
</tbody>
</table>

B. Application Requirements
The Department requires the following pages for the application packet. Missing information could result in disqualification of the application.

- Completed Cover Page;
- Project Summary (should be no longer than five pages);
- Written consent of the teachers’ employee representative (see Evaluation Rubric for applicability).

C. Submission Instructions
To be considered, the eligible applicant must combine all documents for the Innovative Education Pilot Program application into a single PDF and submit by email to IEPP@education.ohio.gov 5 p.m. on March 28, 2022.

D. Review Process
The review process consists of two levels, the preliminary legal review and content expert evaluation.

The preliminary legal review includes a review against the requirements outlined in the Primary Legal Review section of the Evaluation Rubric. If the application does not meet the requirements in the Preliminary Legal Review, the application will not proceed to the Content Expert Evaluation.

During the Content Expert Evaluation, subject matter experts at the Department will review the application against the criteria outlined in the Evaluation Rubric using the rating characteristics. Each question (1 through 6) must receive a minimum rating of Adequately Developed, or two points, (unless question 6 is considered not applicable) to be considered for exemption approval.

E. Notification of Exemption
The Department will notify applicants by email if the exemption is approved or not approved. The contact person listed on the cover page of the application will receive notification by June 8, 2022.

F. Annual Report
Each school district, educational service center or chartered nonpublic school receiving an exemption is required to submit an annual report containing such information as may reasonably be necessary to evaluate whether or not objectives of the pilot program are being met. The deadline to submit an annual report is March 28, 2022 to IEPP@education.ohio.gov
Innovative Education Pilot Program
Evaluation Rubric

Preliminary Legal Review

☐ The applicant is a school district, governing board of an educational service center or administrative authority of a chartered nonpublic school.

☐ If the applicant employs teachers under a collective bargaining agreement, the written consent of the teachers’ employee representative is included with the application.

☐ The proposed program requires a waiver from a statutory provision or rule and that statutory provision or rule is specified in the application.

☐ The requested exemption is in Title XXXIII or a rule adopted thereunder, and the requested exemption is not for a provision contained in or rule adopted pursuant to Chapters 3307, 3309, 3323 or sections 3319.07 to 3319.21 of the Ohio Revised Code.

☐ The requested exemption is not for any Operating Standard adopted under (B)(2) or (D) of section 3301.07 of the Ohio Revised Code.

Notes: __________________________________________________________

_________________________ __________________________
Reviewed by: Date:

☐ Approved ☐ Not Approved

Name: ___________________________ Title: ___________________________
Rating Characteristics

Not Applicable – Only questions 6 through 9 can be considered “not applicable.” Questions 1 through 5 shall be rated on a scale of 0 to 4, as outlined below.

Not Addressed/0 points – The response lacks the required information.

Poorly Developed/1 point – The response is significantly incomplete, missing required information or otherwise raises substantial concerns about the viability of the plan or the applicant’s capacity to execute it.

Adequately Developed/2 points – The response meets the requirements of the criteria but contains substantial gaps.

Well Developed/3 points – The response meets the established criteria, but it requires additional information, explanation or detail.

Fully Developed/4 points – The response demonstrates the applicant’s thorough understanding of key issues via specific and accurate information. The response presents a clear, realistic picture of how the district/school expects to operate using the requested waiver and inspires confidence in the applicant’s capacity to execute the plan effectively.

<table>
<thead>
<tr>
<th>#</th>
<th>Criteria</th>
<th>OAC</th>
<th>Criteria Score</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>N/A 0 1 2 3 4</td>
</tr>
<tr>
<td>1</td>
<td>A detailed description of the proposed innovative pilot program, including how the program meets the Department’s definition of innovation.</td>
<td>(C)</td>
<td></td>
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<tr>
<td>2</td>
<td>A detailed description of how impact will be measured, including student and adult indicators. Include measurable outcomes, performance indicators and method of evaluation.</td>
<td>(C)</td>
<td></td>
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<tr>
<td>3</td>
<td>Anticipated costs or savings associated with the program, if any.</td>
<td>(C)</td>
<td></td>
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<tr>
<td>4</td>
<td>Specific timelines for planning, implementation and evaluation.</td>
<td>(C)</td>
<td></td>
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<td>Identification of the specific statutory provisions and/or rules for which an exemption request is made; rationale for each exemption request; specific period of time for which each exemption is requested.</td>
<td>(C)</td>
<td></td>
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<tr>
<td>9</td>
<td>If an application requests an exemption in order to provide professional development for educators, the application must contain high-quality professional development activities as defined by standards for professional development adopted by the State Board of Education, which are available on the Department's website.</td>
<td>(D)</td>
<td></td>
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**Note for Applicants and Reviewers:** Consider the following requirements outlined in administrative rule when drafting or evaluating an application:

Ohio Administrative Code 3301-46-01(G)

*Each school district, educational service center, or chartered nonpublic school receiving an exemption shall make an annual report and such other reports as required by the department of education, in such form and containing such information as may reasonably be necessary to evaluate whether or not objectives of the pilot program are being met. Applications to continue programs approved in accordance with this rule shall not be considered complete until an annual evaluation report is completed and submitted to the department.*

Reviewer Signature:____________________________________________________ Date:_____________

Reviewer Signature:____________________________________________________ Date:_____________

Reviewer Signature:____________________________________________________ Date:_____________

Notes/Requests for Supplemental Information:

☐ Approved

☐ Not Approved