

# Louisiana Believes

## EOC and LAA2 2016-2017 Graduation Waiver Application Timelines

Requested Periods	Submission Deadlines
Spring 2017	Wednesday January 18, 2017
Summer 2017	Wednesday May 31, 2017

All application packets should be securely emailed to:

[SpecialEducation@la.gov](mailto:SpecialEducation@la.gov)

If you have any questions please email [SpecialEducation@la.gov](mailto:SpecialEducation@la.gov)

**Instructions:** Special Education Graduation Waiver application packets should be submitted via secure email to [SpecialEducation@la.gov](mailto:SpecialEducation@la.gov).

Each student application should include the following:

**1. Cover Page:**

- a. LEA
- b. School
- c. Student's First Letter of First Name
- d. Student's First Three Letters of Last Name
- e. Student's Louisiana Secure ID

**2. Parental Consent for LDE Access:**

- a. A signed letter giving the state permission to view the current IEP, EOC Test Scores, LAA2 Test Scores, and Special Education Evaluation containing personally identifiable information (PII) of one the student.

**3. Re-Evaluation:**

- a. Dated page with determined diagnosis

**4. IEP Pages:**

- a. General Student Information Page
- b. Instructional Plan Page
- c. Placement Page
- d. LAA2 Checklist (if applicable)

**5. Test Scores:**

- a. Test scores, EOC and LAA2, can be obtained/printed from the [LEADS Portal](#)

**6. Remediation Letter:**

- a. A signed letter from the administrator stating the student attended targeted remedial instruction



# LOUISIANA DEPARTMENT OF EDUCATION

## PARENTAL CONSENT FORM

I have requested that the Louisiana Department of Education (LDE) access my child's records for the purposes of:  
*Special Education Graduation Waiver Review Process*

I agree that they will have access to the following personally identifiable information:  
*First name, Last name, Social Security Number, Birthday, Current IEP, EOC Test Scores, LAA2 Test Scores, and Special Education Evaluation containing personally identifiable information (PII) of the student listed below.*

I CONSENT to the LDE accessing my child's personal information listed above for the purposes stated above.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
My Full Name (please print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
My Child's Full Name (please print)

**Louisiana Believes**



# LOUISIANA DEPARTMENT OF EDUCATION

## LAA 2 Test Score Verification Form

First Letter of First Name:  First Three Letters of Last Name:  Day of Birth:

Louisiana Secure ID:  Grade: \_\_\_\_\_

School: \_\_\_\_\_ Site Code: \_\_\_\_\_

LEA/District: \_\_\_\_\_ LEA Code: \_\_\_\_\_

### District-administered LAA 2 raw scores:

Test Date	English		Math		Science		Social Studies	
	Passed	Failed	Passed	Failed	Passed	Failed	Passed	Failed
MM/DD/YYYY								

### State-wide LAA 2 scores:

Test Date	English		Math		Science		Social Studies	
	Passed	Failed	Passed	Failed	Passed	Failed	Passed	Failed
MM/DD/YYYY								

By signing below, I verify that the student has earned the scores in the table above.

Principal \_\_\_\_\_ Date \_\_\_\_\_

District Test Coordinator \_\_\_\_\_ Date \_\_\_\_\_

## Louisiana Believes

**2016-2017 Student Application Assurance Data Sheet**

**Instructions:** Pursuant to the graduation exit examination waivers list all students applying for waivers in the 12th grade that have participated in either EOC and/ or LAA2 assessment who are eligible for graduation. Please do not submit an application for any student in the 11<sup>th</sup> grade unless he or she is anticipating graduating during the current 2016-2017 school year and have fulfilled all graduation requirements to include a minimum of 23 Carnegie units by the end of this current school year.

Local Education Agency (LEA)	First Letter Of Student's First Name	First Three Letters Of Student's Last Name	Student's Louisiana Secure ID	Current Grade	School Currently Attending	Contact Person For Waiver	Contact Person's Email Address	Contact Person's Telephone Number
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								
11.								
12.								
13.								
14.								
15.								
16.								

**Assurance Statement:** The local education agency certifies and assures that information submitted in the above chart is true and correct. The LEA further assures that each student whose name appears in conjunction with this waiver process has met the necessary requirements for an End of Course , Graduation Exit Examination or Louisiana LEAP Alternate Assessment, Level 2 waiver application request under the criteria set forth in Bulletin 741, §2319B regarding waiver of a required graduation examination component.

<b>Superintendent or Designee Signature:</b>	<b>Date</b>
<b>Superintendent or Designee Printed Name/Title:</b>	

## 2016-2017 Student Application Assurance Data Sheet

Local Education Agency (LEA)	First Letter Of Student's First Name	First Three Letters Of Student's Last Name	Student's Louisiana Secure ID	Current Grade	School Currently Attending	Contact Person For Waiver	Contact Person's Email Address	Contact Person's Telephone Number
17.								
18.								
19.								
20.								
21.								
22.								
23.								
24.								
25.								
26.								
27.								
28.								
29.								
30.								
31.								
32.								
33.								
34.								
35.								

**Assurance Statement:** The local education agency certifies and assures that information submitted in the above chart is true and correct. The LEA further assures that each student whose name appears in conjunction with this waiver process has met the necessary requirements for an End of Course, Graduation Exit Examination or Louisiana Alternate Assessment, Level 2 waiver application request under the criteria set forth in Bulletin 741, §2319B regarding waiver of a required graduation examination component.

<b>Superintendent or Designee Signature</b>	<b>Date</b>
<b>Superintendent or Designee Printed Name/Title:</b>	