

COUNTY OF LOS ANGELES SCHOOL WAIVER APPLICATION FOR GRADES TK – 2 IN-PERSON EDUCATION COVER SHEET

Full Name of School Requesting Waiver:

School Type:

Date of Application:

School District Superintendent or School Head Administrator Name:

Phone: _____ Email: _____

Address: _____ City: _____ Zip: _____

School District Where Your School is Located:

Estimated total number of students that will return for in classroom instruction per grade (if none, enter 0):

TK: _____ K: _____ 1: _____ 2: _____

Estimated total number of administrators, teachers, and other employees that will be returning to support in classroom instruction for grades TK - 2: _____

Total number of administrators, teachers, and other staff employed by the school:

Anticipated total number of cohorts returning: _____

Anticipated mode of attendance for In-classroom instruction:

Percent of student body who qualify for Free Or Reduced-Priced Meals: _____

URL where re-opening protocols are posted: _____



Supporting materials to include with this cover sheet:

- Letter from district superintendent or head administrator for private/charter school requesting this waiver.
- Letters of support from the following groups OR in lieu of letters of support, a written attestation signed by the superintendent/head administrator describing the consultation process with each of the following groups, including the dates of consultation and the names of all organizations consulted with:
 - All labor unions representing employees at the school reopening for classroom instruction. If school staff are not represented by a union, then the applicant must describe the process by which it consulted with school staff.
 - Parent organization(s) at the school reopening for classroom instruction. If there is no representative parent organization at the school, then the applicant must describe the process by which it consulted with parents of students at the school.
 - Community organization(s) that provide services for students and their families who attend the school reopening for classroom instruction.
- A completed Los Angeles County Department of Public Health [K-12 School re-opening protocol checklist](#).

By checking these boxes, I attest:

- Our district/school has obtained sufficient and appropriate personal protective equipment (PPE), as defined by the reopening protocols and California Department of Public health guidance, for all teachers and staff who will be involved in in-person instruction.
- A plan or protocol has been developed for incorporating surveillance testing into regular school operations of all school personnel which describes the strategy for ensuring access to periodic testing for all school personnel to be implemented when instructed by the Department of Public Health based on local disease trends and/or after resolution of an outbreak at the school.
- I am aware that this form and all supporting documents will be posted publicly on the Los Angeles County Department of Public Health website.

EMAIL THIS COMPLETED COVER SHEET AND ALL SUPPORTING MATERIALS TO SchoolwaiversC19@ph.lacounty.gov.

