KY Education Professional Standards Board
Regulation Waiver Request

Name _____

SS or EPSB ID Number _____

Date of Request _____

TO THE REQUESTER: The EPSB may waive regulations only under extraordinary circumstances. After responding fully to the following items, please submit this form with your letter to the Board requesting a waiver of regulations. You may also submit additional materials for the Board's consideration: letters of recommendation, statements substantiating your extenuating circumstances, medical documents, etc.

All requests for waiver shall be submitted in writing to the Board's Executive Director at least 30 days before the next regularly scheduled board meeting. Each waiver request shall set forth all facts to support the extraordinary circumstances necessary for waiver and shall stipulate the specific regulation for which the waiver is requested.

1. State the action you are requesting from the Board which will require a waiver of regulation:

2. State the extraordinary circumstance(s) that caused you to initiate this request:

3. Detail all attempts made to resolve this situation before pursuing this waiver request (attach supporting documents and/or explanation as needed):

Send all materials for waiver requests to the following address:

KDE OELE, Director, 300 Sower Blvd., 5th Floor, Frankfort, KY 40601