

**WILLOWS UNIFIED SCHOOL DISTRICT**  
**Office of the Superintendent**

**Date: May 6, 2021**

**Request For Placement on Board Agenda:**

**AGENDA TOPIC: Action**  
**Waiver Request – Carl D. Perkins Vocational and Technical**  
**Education Act**

**PRESENTER: Debbie Costello, Director of Business Services**

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Willow Unified School District does not meet the minimum allocation requirements (\$15,000) to receive federal 2021-22 Perkins funds without having a waiver approved for the following Ed Code section:

Ed Code Title: Strengthening Career and Technical Education for the 21<sup>st</sup> Century (Perkins V)

Ed Code Section: PL 109-270 Section 131(c)(1)

Ed Code Authority: PL 109-270 Section 131(c)(2)

Ed Code or CCR to Waive: Strengthening Career and Technical Education for the 21<sup>st</sup> Century (Perkins V), Public law 109-270 Section 131(c)(1), that requires local agencies whose allocations are less than \$15,000 to enter into to a consortium with other agencies for the purpose of meeting the \$15,000 minimum grant requirement.

Our previous waiver that was approved in 2016 is expiring so a new waiver request must be submitted to the California Department of Education by May 17, 2021 to maintain eligibility for future funding.

**RECOMMENDATION:**

The administration requests that the Board of Directors approve the Carl D. Perkins Voc and Tech Ed Act Wavier Request for the school years beginning on July 1, 2021 through June 30, 2025 (4 years).



## Waiver Request System

### Submission

#### Instructions:

- Fields marked with an asterisk (\*) are required.
- The format for all dates is mm/dd/yyyy.
- Use the 'Attachments' section below to attach all supporting documents if required.
- For General Waivers – you will not be allowed to submit your waiver without attaching the following:
  - ◆ Documentation of Evidence of the advisory council
  - ◆ Documentation of bargaining unit participation
- Make sure all information is accurate before selecting submit. You will not be able to edit this waiver once you have submitted the form.
- DO NOT at any time hit the back button. You will lose all your information.
- Use brackets [ ] for putting Education Code section to be waived. See FAQ for details.
- Do not use abbreviations for bargaining units.
- Refer to the FAQ for general questions.
- The waiver request page is time sensitive. You must be able to complete the waiver request within two hours. Failure to complete and submit the waiver request in the two hours will result in the loss of all previously entered information.

#### District Information

\*County: Glenn ▼

\*District: Willows Unified ▼

\*Address: 823 West Laurel St.

\*City: Willows

\*State: CA

\*Zip code: 95988

Fax: 530-934-6609

#### Waiver Information

\*Period of request start date: 7/1/2021

\*Period of request end date: 6/30/2025

\*Is this waiver a renewal?  No  Yes

\*Previous waiver number: FEd-2-2016-W-01

\*Previous SBE approval date: 5/12/16 \*

\*Waiver topic: Federal Program Waiver ▼

\*Ed Code title: Carl D. Perkins Voc and Tech Ed Act ▼

\*Ed Code section: PL 109-270 Section 131(c)(1)

\*Ed Code authority: PL 109-270 Section 131(c)(2)

\*Education Code or California Code of Regulations (CCR) section to be Waived. If the request is to waive a portion of a section, type the text of the pertinent sentence of the law, or those exact phrases requested to be waived (use [ ] to strike out).

\*Student population 1332

\*Located in a(n) Rural  city

\*What is the NCES locale code for your school? 32

\*Describe briefly the circumstances that brought about the request and why the waiver is necessary to achieve improved student performance and/or streamline or facilitate local agency operations. If more space is needed, please attach additional documents using the 'Attachments' section below.

The waiver of this section that was previously requested and approved is expiring. Approval of this waiver request will allow Willows Unified ongoing eligibility through June 30, 2025 for Perkins funding to serve our students

## Approvals/Review

\*Local board approval date: \*

## Attachments

If needed, upload additional file(s) here (must be Word, Excel, or PDF format)

No file chosen

## Contact Information

\*Title:

\*First name: Debbie

\*Last name: Costello

\*Position: Director of Business Services

\*E-mail: dcostello@willowsunified.org

\*Area code: 530

\*Telephone: 934-6600

Extension: 5

I hereby certify that I have gone through my authorizing school district and or Special Education Local Plan Area (SELPA), that I am the superintendent or the superintendent's designee and that the information provided on this application is true and correct.

Submit

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[Questions: Waiver Office | 916-319-0824](#)

California Department of Education  
1430 N Street  
Sacramento, CA 95814

[Web Policy](#)