

**School Board Governance Improvement Act of 2012  
Waiver/Extension Request Form**

**Revised May 2020**

*School board members may request a waiver or extension from all or part of the current year's training requirements using the form letter below. Only the state superintendent of education has authority to grant such requests. Once you have completed the letter, you may mail, email or fax it to:*

Governance Act Waiver/Extension Request  
Alabama Association of School Boards  
P.O. Box 4980  
Montgomery, AL 36103-4980

Fax: 334-270-0000  
Email: sbell@alabamaschoolboards.org

AASB will forward the request to the state superintendent, and you will be notified by mail once your request has been approved or denied.

**NOTICE:**

The School Board Governance Improvement Act mandates annual training for local school board members. Such training is not to be taken lightly, as the law empowers the state superintendent of education to strip board members of their eligibility for another term in office if they fail to comply with the Act, specifically the training requirements.

However, the state superintendent of education will consider requests for waivers or extensions from some or all of the training requirements in a given year if the circumstances are so unavoidable or extraordinary as to create a significant hardship for the board members. Note that waivers/extensions are granted for a specific year and are based on significant or special circumstances.

\_\_\_\_\_ **I have read and understand these statements.**

**Printed Name:** \_\_\_\_\_

**School Board:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Date: \_\_\_\_\_

Dr. Eric Mackey  
State Superintendent of Education  
5114 Gordon Persons Building  
PO Box 302101  
Montgomery, AL 36130-2101

Dear Dr. Mackey:

I am requesting a waiver/extension from the following portions of the School Board Governance Improvement Act:

- 2 hours of whole board training
- All 6 hours of required training, including whole board training
- A portion of the required training hours. Number of hours to be waived: \_\_\_\_\_
- Extension to complete required training hours. Number of hours needed: \_\_\_\_\_
- Extension to complete orientations.

This request is for the \_\_\_\_\_ training year.

I am aware that waivers or extensions are only granted for a specific year and are considered warranted only if the circumstances are unavoidable or would create a significant hardship. I am requesting this waiver/extension because: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**If you have any questions regarding this application, you may contact me at:**

Name: \_\_\_\_\_

School Board: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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***To be completed by state superintendent of education:***

Request Denied

Request Approved

Request Approved Conditionally Upon the Following: \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_