

**Snohomish School District
CONTRACT WAIVER REQUEST FORM**

The Collective Bargaining Agreement between the Snohomish School District and the Snohomish Education Association provides a process for a school site to obtain a waiver of a specific contract provision as follows:

No employee will be required without his/her consent to take any action in connection with a shared decision making arrangement or decision that violates his/her rights under the Agreement, and no adverse employment action will be taken against any employee because of his/her refusal to give such consent. If any aspect of a shared decision making arrangement is contrary to the terms of this Agreement, said aspect will not be implemented, or if already implemented will be immediately discontinued, unless a waiver is obtained from the Association and District. Said waiver must be in writing, and must specify the contractual provision waived, the nature and duration of the waiver, the employees affected by the waiver, and justification for the waiver. The waiver, if granted, will be considered an addendum to this Agreement, and any dispute as to its interpretation or application will constitute a grievance within the meaning of Article 12.00. Except to the extent waived pursuant to the above, this Agreement will remain in full force and effect, and have full application to the employees who are affected by the shared decision making arrangements. [Section 8.07, paragraph C of the Collective Bargaining Agreement]

**THIS FORM MUST BE USED TO REQUEST ANY SUCH WAIVER AS DESCRIBED ABOVE.
[A request for a waiver to be effective the following school year
must be submitted no later than March 15.]**

SCHOOL: _____

DATE: _____

1.	THE WAIVER IS FOR WHAT SPECIFIC CONTRACT PROVISION?
2.	WHAT ARE THE JUSTIFICATION/REASONS FOR THE REQUESTED WAIVER?
3.	WHAT ARE THE BEGINNING AND ENDING DATES FOR THE REQUESTED WAIVER? (NOTE: No waiver will be granted that extends beyond the expiration date of the current Collective Bargaining Agreement.)

Beginning: _____ **Ending:** _____

4.	WHAT EMPLOYEES ARE AFFECTED BY THE WAIVER?
5.	<p>WAS THE DECISION TO REQUEST THIS WAIVER MADE BY THE SCHOOL'S SHARED DECISION MAKING TEAM?</p> <p>Yes: _____ No: _____</p> <p>DOES THE DECISION REFLECT A CONSENSUS OF THOSE IN SEA'S BARGAINING UNIT AT THE SCHOOL SITE?</p> <p>Yes: _____ No: _____</p> <p>DESCRIBE BELOW HOW THE DECISION WAS MADE:</p>
6.	WHAT IS THE POTENTIAL COST/BUDGET IMPACT OF THE WAIVER?

THIS FORM MUST BE SUBMITTED TO THE SUPERINTENDENT AND APPROVAL RECEIVED FROM THE DISTRICT AND SEA PRIOR TO IMPLEMENTATION OF THE REQUESTED WAIVER.

BUILDING PRINCIPAL

SEA BUILDING REPRESENTATIVE

DATE

DATE

Response to Waiver Request

Request granted: _____ **Request denied:** _____

Request granted under the following conditions:

Superintendent

SEA President

Date

Date