



STATE BOARD OF EDUCATION

Old Capitol Building, PO BOX 47206, OLYMPIA, WA 98504-7206; (360) 725-6029; www.sbe.wa.gov

MINIMUM BASIC EDUCATION REQUIREMENT COMPLIANCE

2009-10 School Year

School District Name: Issaquah School District; Name of Superintendent: Dr. Steve Rasmussen; Contact Person: Jacob B. Kuper; Contact Email: kuperj@issaquah.wednet.edu; Contact Phone: 425-837-7016; Mailing Address: 565 NW Holly Street, Issaquah, WA 98027

Table with 3 columns: In Compliance, In Compliance with Approved Waiver, Not in Compliance. Rows include: Total Instructional Hour Offering Grades 1-12, Total Instructional Hour Offering Kindergarten, Minimum 180-Day School Year for Grades 1 and above, Minimum 180-Day School Year for Kindergarten, K-3/4-12 Students to Classroom Teacher Ratio, State High School Graduation Minimum Requirements.

Certification of Compliance section with text: We hereby certify that the board of directors has been apprised and that the _____ School District, meets all the requirements relating to the minimum requirements of state basic education programs and, that all deviations from these rules and regulations of the Washington State Board of Education are recorded. Includes signature lines for Superintendent and Board President or Chair.