

**Virginia Department of Education**  
**Office of Special Education and Student Services**  
 Request for Waiver of Requirements for Personnel Providing Interpreting Services

*Due to VDOE within 30 days of interpreter assignment/re-assignment.*

Local educational agency \_\_\_\_\_ School Year \_\_\_\_\_  
 Contact Person \_\_\_\_\_ Title \_\_\_\_\_  
 Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Name	Social Security Number	Date and LEA where first hired <sup>1</sup> in VA	Type of Interpreting/ Transliterating <sup>2</sup>	Virginia Quality Assurance Screening Level and Date		Type of Waiver Requested <sup>3</sup>	Date of most recent registration for VQAS	For VDOE use only	
				Interpreting	Transliterating			Date approved	Date not approved

<sup>1</sup> Insert the date first hired to provide interpreting services in **any** local educational agency (LEA) in Virginia (school division, state-operated program, or one of the Virginia schools for the deaf and the blind); include name of LEA where first hired  
<sup>2</sup> Insert sign language interpreting, sign language transliterating, cued speech/language transliterating, or oral interpreting  
<sup>3</sup> Insert the following codes for type of interpreting requirement waiver:  
 1– waiver of requirement to hold VQAS Level I upon hiring; persons must have registered to take the VQAS Assessment prior to hiring by the local educational agency or hold a credential from another state or a National Association for the Deaf Level I, II or III  
 3A – waiver of requirement to hold a VQAS Level III by the third anniversary of hiring; persons must hold at least a VQAS Level I to be eligible to receive this waiver  
 3B – request for a second year waiver of requirement to hold a VQAS Level III by the third anniversary of hiring; persons must have received a waiver for the prior school year, must hold a VQAS Level II and have shown improvement in percentage scores in the last Performance Assessment (include a copy of all Performance Assessment results)