## KIB-E

## ACCESS TO SCHOOL PROPERTY BY SEX OFFENDERS

This form is to be completed each time access is requested and is limited to that specific occurrence unless otherwise noted below, and must be submitted three (3) school days in advance to the applicable building Principal or Superintendent.

Name	Date of	Request
Date of Birth (Month/Day/Year	c)/	_/
Gender (circle one) Male/Fema	ile	
Home Address		
Phone Numbers		
Home	Cell	Work
E-mail Address		
Date(s)/Listing of Events Rec	uesting to be	on School Property
Time of Day Requesting to be	on School Pro	perty
Name of School/Building or Lo	cation on Sch	ool Campus:
Access shall be limited to t the parking lot and sidew location designated herein.	-	
State the specific reason/na		request to come upon school
	* * *	* *
If request is related to information:		
Current Employer		Years Employed
Name of Immediate Supervisor		
Supervisor's Phone Numbers		
	Work	Cell

## ACCESS TO SCHOOL PROPERTY BY SEX OFFENDERS

Applicants may NOT come on school property until the applicant has received this form indicating approval from the superintendent, and access shall be limited as indicated below.

Signature below indicates the information provided herein is true and accurate and the requesting party is in full compliance with all Wyoming statutes regarding registered sex offenders.

Signature	Date
**SCHOOL USE ONLY**	
Form Submitted to:	
Principal/Superintendent Name:	
Building	
Date Form Received//	
Limitations/Expectations for Access	
Dates of Access	
This request is Approved Denied	
Superintendent Signature	Date

First Reading: 4-9-24 Second Reading: 5-6-24