## 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 d	of Request
Date of Birth (Month/Day/Year	)/	/
Gender (circle one) Male/Fema	le	
Home Address		
Phone Numbers		
	Cell	Work
E-mail Address		
Date(s) Requesting to be on S	chool Prope	rty
Time of Day Requesting to be	on School Pi	roperty
Name of School/Building or Lo	cation on So	chool Campus:
	_	and/or location noted herein, access to the building or
State the specific reason/na property		e request to come upon school
	* * *	* *
If request is related to information:		yment, provide the following
Current Employer		Years Employed
Name of Immediate Supervisor		
Supervisor's Phone Numbers		
	Work	Cell

## ACCESS TO SCHOOL PROPERTY BY SEX OFFENDERS

Applicant may NOT come on school property until 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 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: 4/10/12 Second Reading: 5/14/12 Reviewed: 1-29-19 (Policy Advisory Council and Board Policy Committee)