

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) _____ Gender (check one) Male Female

Home Address _____

Phone Numbers _____

Home

Cell

Work

E-mail address _____

Date(s) Requesting to be on School Property _____

Time of Day Requesting to be on School Property _____

Name of School/Building or Location on School Campus _____

Access shall be limited to the building and/or location noted herein, the parking lot and sidewalk/public access to the building or location designated herein.

State the specific reason/nature of the request to come upon school property _____

* * * * *

If request is related to your employment, provide the following information:

Current Employer _____

Years Employed _____ Name of Immediate Supervisor _____

Supervisor's Phone Numbers _____

Work

Cell

Applicant may NOT come on school property until applicant has received this form indicating approved by 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 _____

This request is ___ Approved ___ Denied By Principal: _____

Superintendent Signature

Date