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 NW BOCES Administrative Director.

me Date of Request		Request	
Date of Birth (Month/Day/Year)		Gender (circle 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 Ca	mpus		
Access shall be limited to the building and/or local access to the building or location designated here		parking lot and sidewalk/public	
State the specific reason/nature of the request to	come upon school pro	perty	
****	k		
If request is related to your employment, provide Current Employer	the following informat	ion:	
	Name of Immediate Supervisor		
Supervisor's Phone Numbers	arrie or immediate sup		
Work		Cell	
Applicants may NOT come on school property unit by the Administrative Director and access shall be Signature below indicates the information provid	limited as indicated be	elow.	
in full compliance with all Wyoming statutes regar			
Signature		Date	
SCHOOL USE ONLY			
Form Submitted to:			
Administrative Director			
Name			
Date Form Received			
Limitations/Expectations for Access			
This request is ApprovedDeni	ed		
Administrative Director Signature		Date	

Policy 8030-R