

UNIFORM EXEMPTION REQUEST

I, _____, (parent, guardian or person in parental relation) request that _____ be exempt from compliance with PS/IS _____'s voluntary Uniform Dress Policy.

OPTIONAL

For information purposes, please indicate reason(s) for exemption request:

- religious (if this reason is checked, a conference is not required.)
- medical
- other _____

I understand that in order to obtain an exemption, I am required to have a conference (by telephone or in person) with the school's appointed designee who will fully explain the reasons and benefits of the school's voluntary uniform policy. I agree that my son/daughter will wear appropriate dress as determined by the principal; i.e., clothing that does not constitute a health or safety hazard and which is not disruptive to the education process.

Parent's (or Guardian's) Signature: _____

Principal's Signature: _____

Date: _____