



"To Build Knowledge and Skills for Success Today and Tomorrow"

REGISTERED SEX OFFENDER WAIVER APPROVAL

Name of Waiver Approval holder: _____

The Meade School District 46-1 has approved the Waiver Request of the above-named Waiver Approval holder (District approver to initial and complete all applicable areas):

___ A non-parent or non-guardian of a student in the Meade School District, for the following purpose(s) only (be specific about place, time, and purpose):

_____.

___ A parent or legal guardian of a student in the Meade School District, for the following purpose(s) only (initial all that are approved):

- ___ Drop-off and pick-up the student on district property
- ___ Parent-teacher conferences held on district property
- ___ Other (be specific about place, time, and purpose):

_____.

Further Conditions or Requirements:

_____.

This Waiver has a beginning date of _____, 2_____.

This Waiver terminates on the earlier of August 31, _____, or on _____.

Any holder of a Waiver Approval may come to the district property for the stated business only, and when entering the building the Waiver Approval holder must first report to and check in at the front office only. When finished, the Waiver Approval holder must immediately leave district property. While on district property, the Waiver Approval holder must present picture identification to district personnel when so requested to assure proper identification. The Waiver holder must be in possession of this Waiver Approval any time the Waiver holder is on district property.

Dated: _____

Meade School District 46-1

By: _____

Title: _____

I agree to abide by all Meade School District 46-1 Policies, including School Board Policy KKA and JFCL, and the directives of authorized Meade School District personnel, including the requirements stated above.

Signature of Waiver Approval holder