

**PARENTAL/GUARDIAN REQUEST FOR PERMISSION
TO VISIT SCHOOL PROPERTY**

If you are a convicted sex offender who is the parent/guardian of a student enrolled in the Bonneville Joint School District 93, you must complete and submit this form to the Superintendent/designee in order to seek permission to visit school property whenever students are present.

After a decision is made whether to grant or deny permission to visit, a copy of either form #4420F1 Letter Granting Request by Convicted Sex Offender for Exception or form #4420F2 Letter Denying Request for Exception by Convicted Sex Offender will be returned to the person requesting the visit.

If permission is granted, the building principal or his/her designee will supervise you on school property whenever you are in any student's vicinity.

Visitation Guidelines:

1. You must report to the principal's office when visiting and log the time you enter the school on your Record of School Visits.
2. For all other visits not listed above, you must go immediately and directly to the principal's office to add the information on your Record of School Visits. If your requested visit will be after regular school hours, you must contact the principal's office prior to your visit and before the end of the school day.
3. When visiting, you must remain under the direct supervision of the principal or school assigned official.
4. When you are to leave, you must go immediately and directly to the principal's office and enter the time that you are leaving on your Record of School Visits.
5. You must then immediately leave the school property.

TO BE COMPLETED IF YOU ARE A CONVICTED SEX OFFENDER AND ARE REQUESTING PERMISSION TO VISIT SCHOOL PROPERTY

This information will be kept in the District Office as well as in the building principal's office where you are seeking permission to visit. You must provide the date, location, and purpose for all anticipated visits to the school (i.e., drop off your child before school or pick up your child after school, attending specific activities, events, or athletic events, or during parent-teacher conferences, etc.). Please be specific in completing this form.

Name (please print)

Residence Address

Signature

Residence City, State, Zip Code

Date

School Visit Requests

Date and Time Requested	Location of Visit	Purpose of Visit

The following is to be completed by District personnel only:

Permission Granted

Permission Denied

Signature
(Superintendent/designee)

Date

Assigned School Visit Supervisor: _____