## SECONDARY DRESS CODE EXEMPTION FORM

## **Waxahachie Independent School District**

411 North Gibson Street Waxahachie, Texas 75165 :: Phone: (972) 923-4631 :: Fax: (972) 923-4759

## PLEASE PRINT

Student Information:				
Date:	Grade Level:	WISD Campus:		
Student Name:				
	(Last)	(Jr., III, etc.)	(First)	(Middle)
Parent/Guardian Name:				
Home Address:	(11	(0:1)	(0: 1.)	( <del>7</del> : 0 1)
Home Phone: ( )	(House # and Street)	(City)  Cell or Work Phone:	(State)	(Zip Code)
Home Frione. ( )	-	Cell of Work Frione.	-	
Exemption Questionnaire:				
1. Does your child have a medical condition that impacts his or her ability to comply with the dress code?				□ Yes □ No
(If yes, please explain.)				
0. D			Contract Construction Contract Construction	
2. Do either you or your child her ability to comply with the di	nave a religious or deeply r ress code?	neid philosophical bell	er that impacts his or	□ Yes □ No
(If yes, please explain.)				
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2. If not account by Overtions 1 and what is very analitie required that requires a dress and account in				
3. If not covered by Questions 1 or 2, what is your specific request that requires a dress code exemption and why?				
and my.				
Signature of Parent	/Guardian	-	Da	ate
Signature of Studer	nt	-	Da	ate

Based on the information provided in this Exemption Request Form and the interview with the parent, the campus principal will make a determination as to whether the exemption is granted. Parents with more than one student enrolled in the District must fill out a separate WISD Secondary Dress Code Exemption Request Form for each student. Any appeal of the campus principal's decision will be treated as a student/parent or guardian complaint under WISD Board Policy FNG(LOCAL).