335F1 – Request for Exception to GWA Electronic Devices Policy

	red expressly by the				
I,	D		, am requesting an	exception to GWA's	
	Parent/Legal Gua	rdian Name			
Electro	onic Devices Policy	for my child,	y child,due to:		
Medic	al Reason(s)		Student's Name		
•		ecific and documented	medical reason for the e	xception below:	
raren	Request A parent may request an exception from the policy for a <u>limited time period and only upon showing a documented and substantial need which cannot be satisfied by other means.</u> Exceptions may be granted at the sole discretion of the Executive Director or his/her designee and may be rescinded by the Executive Director at any time. Please provide reason for requesting exception below:				
•					
•	Length of time/date	e(s) for the duration of t	he exception:		
Except	tion:				
Except		Denied	Date:		
Authoi					
		Executive Dire	ctor or Designee		