

George Washington Academy
335F1 – Request for Exception to GWA Electronic Devices Policy

School Year: _____

Child's Name: _____ **Grade:** _____ **Teacher:** _____

Exceptions will be made only for compelling circumstances and only if expressly requested by the parent/requestor. Please see Policy 335 - Electronic Devices and Non-School Appropriate Items.

I, _____, am requesting an exception to GWA's Electronic Devices Policy for
Parent/Legal Guardian Name
my child, _____ due to:
Student's Name

Medical Reason _____

GWA administrators may give specific permission for written parental requests for students to possess electronic devices during the regular school day (or instructional time) for specific and documented medical reason, if the devices are on silent mode.

- **Please provide a specific and documented medical reason for the exception below:**

Parent Request _____

A parent may request an exception from the policy for a limited time period and only upon showing a documented and substantial need which cannot be satisfied by other means. Exceptions may be granted at the sole discretion of the Executive Director or his/her designee and may be rescinded by the Executive Director at any time.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:**

Type of Device: _____ **Length of time/date(s) for the duration of the exception:** _____

Parent Signature: _____ **Date:** _____

Exception: **Granted** _____ **Denied** _____

Authorized Signature: _____ **Date:** _____

Executive Director or Designee