

Garden Valley School District No. 71

STUDENTS

3260F

Electronic Devices Allowed, With Controls

Student-Owned Electronic Communications Devices

WAIVER for EMERGENCY DAILY ACCESS TO CELL PHONE FORM

Student Name_____

Request for Waiver Dates-- From:_____To:_____

Parent or Guardian Signature

This signature confirms that an actual emergency exists and is not just because the student wants more access to their phone than other students get. The student will have access to their cell phone at any time in the office for a current emergency. The phone must be turned in to the office before classes begin for the day and may be picked up at the end of the school day.

Administration Signature of Approval_____Date_____

Policy History:

Adopted on: 07 - 09 - 2019

Revised on:

Reviewed on: 07-09-2019