Appendix A

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
MANDATORY SCHOOL UNIFIED DRESS PROGRAM

(School Name)

APPLICATION FOR UNIFIED DRESS EXEMPTION

Parents/guardians requesting an exemption from participating in a school-wide unified dress program must complete this application form, in full, and return it to the principal of the school. * The principal’s response will be transmitted to you on this same form within ten school days.

☐ I REQUEST AN EXEMPTION FROM PARTICIPATING IN THE SCHOOL UNIFIED DRESS PROGRAM.

Signature of Parent/Guardian_________________________________________ Date________

Print Name of Parent/Guardian________________________________________

Household Street Address______________________________________________

________________________________________________________________________

Student(s) Name(s) - Please Print:

________________________________________________________________________ Grade ______

________________________________________________________________________ Grade ______

________________________________________________________________________ Grade ______

* The school must make provisions for those students who, by reason of financial hardship, cannot comply with the mandatory unified dress program.

-----------PRINCIPAL’S RESPONSE-----------

Comments:

________________________________________________________________________

Principal__________________________________________________________ (Please print name.)

☐ Approved ☐ Denied _______________________________________________ (Principal’s Signature) ____________________ (Date)

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