

ST. MARY'S COUNTY PUBLIC SCHOOLS
Department of Student Services

LEVEL OF MATURITY WAIVER / ALTERNATIVE PROGRAM SETTING WAIVER FOR MANDATORY KINDERGARTEN

Name of Student: _____ Date of Birth: _____

Address of Student: _____

Parents/Legal Guardians: _____ Telephone: _____

School Year _____ Age of Student: _____ Assigned School District: _____

Check appropriate items and sign below:

- I. I am requesting a waiver from mandatory kindergarten/school attendance for one (1) year based on the maturity level of my child and will be registering my child in kindergarten the following year.
- II. I am requesting a waiver from mandatory kindergarten in order to place my child in one of the following alternative program settings and will be registering my child in first grade the following year:
- a. Full-time licensed childcare center
 - b. Full-time registered family daycare home
 - c. Part-time Head Start 5-year old program

Name of Program

Address of Facility

License/Registration Number

Expiration Date

Signature of Parents/Legal Guardians

Date

Return this form to: Director of Student Services
St. Mary's County Public Schools
23160 Moakley Street, Suite 104
Leonardtown, Maryland 20650

Action of Waiver Request: Approved
 Denied

Director of Student Services
(301-475-5511, ext. 32150)

Date

cc: Principal - Assigned School
Supervisor of Early Childhood