## **PERSONNEL**

## PETITION FOR WAIVER OF WAGE DEDUCTION REQUIREMENT

Name of Applicant:	
Date:	
I petition for a waiver of any costs of the records check pro	deduction from my future wages to reimburse the school district for ocedures.
My reasons for making this p	etition are as follows:
I understand that in the event Superintendent of Schools	my petition is rejected, I may appeal that decision to the
	Applicant's Signature