

Valinda School of Academics

EXEMPTION FROM THE STUDENT UNIFORM REQUIREMENT

Name of person submitting this application: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name of student (one per form): \_\_\_\_\_

Address: \_\_\_\_\_ Telephone \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ School Year: \_\_\_\_\_

I certify that I am the parent or legal guardian of the student named above. I choose not to have my child named above comply with the student uniform policy adopted by the Hacienda La Puente Unified School District Board of Education. I hereby request an exemption from the student uniform requirement on behalf of the above-named student for the current school year at the above-referenced school. I understand that this exemption is for the **current school year only**. I understand that if my child does not wear a uniform, he/she must comply with the district dress code.

The reason for my application for this exemption is as follows: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Parent/Guardian

Date

Signature of School Administrator

Date of Conference (If applicable)