

SUMTER COUNTY SCHOOL BOARD
2680 WEST COUNTY ROAD 476
BUSHNELL, FLORIDA 33513

Principal's Initials
____ Sending School (____ date received)
____ Receiving School (____ date received)

Special Attendance Request For School Year 20____-20____

Name of Student _____ Grade _____

Parent(s) Name _____ Phone (____) _____

Mailing Address _____ / _____ / _____

Physical address _____ / _____ / _____ City _____ Zip Code _____
City/Zip Code _____ Zoned School _____ school zone _____

Special permission to enroll in the _____ School _____ County, Florida

Reason for request: Hardship _____ Medical _____ Special Program _____ Child Care _____

Explain: _____

ONE-YEAR APPROVAL: This permit is in force the current school year, and is a privilege provided that the student's attendance, conduct and academic progress are satisfactory. During the approval year, any severe attendance, truancy or discipline problems will result in the REMOVAL of approval to attend the out of zone school for the remainder of that year.

TRANSPORTATION : The attendance approval, if granted, will be with the understanding that the Parent will be responsible for providing transportation to and from school.

X _____
Parent Signature

Student Services Review: _____ Administrative Recommendation: _____

Recommendation:

Approved _____ Not Approved _____

Approved Conditionally _____

**Approved As Recommended:
(with no transportation provided)**

Superintendent/Designee

School Board Meeting Date

Send **all** copies to the office of the Superintendent. Appropriate copies will be returned indicating action taken.