

Los Angeles Unified School District
Robert Frost Middle School
Robert Frost Middle School Technology/Math Science Magnet
12314 Bradford Place
Granada Hills, California 91344
Telephone: (818) 360-2146 Fax: (818) 360-9584
Local District 1

David Brewer, III
Superintendent of Schools

Jean Brown
District 1 Superintendent

Elias De La Torre
Principal

Request for Waiver from Compliance with the School Uniform Policy

RATIONALE FOR DRESS CODE: Frost Middle School aims to provide students with a quality education in a safe, wholesome environment. School is a place where the "business of learning" is of the utmost value. The purpose of this dress code is to focus the energies of all who work here - faculty, staff and students - on our primary purpose, education. This must be our primary focus and area of energy.

Dress Code Waiver committee will be made up of an administrator, teacher, classified staff member, parent and student. Requesting student and parent must be present at the waiver meeting. The Waiver Committee will meet on the last Monday of the Month. **Failure to attend meeting will result in the denial of waiver process.**

Student Name: _____ **Date of Birth:** _____ **HR** _____

Parent or Guardian: _____ **Date:** _____

Address: _____

Phone Number(s): _____

Briefly describe the basis of your request for a waiver:

I have thoroughly read the uniform policy and the non-uniform dress code and would like to continue with the waiver process. I understand that the waiver will take effect after I have met with the dress code committee regarding my waiver request.

Parent signature: _____ Date: _____

This section to be completed by the Dress Code Committee conducting the waiver meeting:

Date of meeting: _____

- Reasons for the uniform policy reviewed with parent: **yes no** (circle)
- Parent/Guardian given a copy of dress code: **yes no** (circle)
- Dress code reviewed with parent(s) and statement signed **yes no** (circle)
- Waiver granted _____ Waiver request withdrawn _____ (check)
- Student was provided a Dress Code Waiver I.D. Card. _____ check

Copy of approved waiver request sent to parent Date: _____

Signature of committee chairperson conducting the meeting: _____ Date: _____