



Administrative Form 5018
VARIANCE REQUEST BASED ON SCHOOL REZONING
ONE FORM PER STUDENT

ATTENTION: This form is only to be used by incoming 5th or 8th grade students and for high school 11th and 12th grade, and applicable siblings, for the first school year of the realigned attendance zones. See Administrative Regulation 5015, Variance from Zoned School, for additional information related to the variance approval process.

Student's Name _____ Birthdate _____

Address _____ City _____ State _____ Zip _____

Home Ph. _____

Parent/Guardian Name _____ Work/Cell Ph. _____

Parent/Guardian Email _____

This variance is requested for grade: _____

This variance request is for a younger sibling of an incoming 5th or 8th grader or for high school an incoming 11th or 12th grader? Y ___ / N ___

If yes, Name of Older Sibling: _____

Name of the school you are zoned for: _____

Name of the school you are applying to: _____

In applying for this Rezoning-WCSD variance, I certify that I fully understand the following:

1. Variances are contingent upon space availability.
2. The District does not provide transportation for students granted variances.
3. Variances for a younger sibling are for one year only.

Parent/Guardian Signature _____ Date _____

Student Signature _____ Date _____

DO NOT WRITE BELOW THIS LINE

Principal's Signature: _____ Date: _____

ACTION: Approved Disapproved

The Washoe County School District is committed to providing an environment free from any form of harassment or discrimination. See Board Policy 9200, Harassment and Discrimination Prohibited, for additional information.