

# SPECIAL EDUCATION WAIVER

I will allow my child to be judged and showcased under the Special Education Division at the South Dakota State Fair.

I understand that in doing this that people outside the school district may be aware that my child is on an Individual Education Plan

School:

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Name of Student:

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Signature of Parent/Guardian:

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Date: \_\_\_\_\_

**This form must accompany all special education entry forms.**