



**Full Time Request Form  
Elementary Students**

<b>Student Name</b>		<b>KUSD ID#</b>	
<b>Current School</b>		<b>Grade</b>	
<b>Student or Parent Email Address</b>		<b>Phone Number</b>	



**Full Time Elementary**

**Required Signature:**

Parent/Guardian Signature: \_\_\_\_\_

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

eSchool Office Use Only: \_\_\_\_\_ Account