

Cook Middle School
Parent Locker Request Form
2018-2019

Student Name:	ID:	Grade:
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I would like to request a locker for my student. I understand that my student is responsible for keeping his/her locker combination private. Also, I understand that my student is responsible for keeping the locker clean and orderly. Lastly, if there are any damages to the locker, I understand my student might ensure charges for those damages.

Briefly describe the reason for your locker request:

Parent Name	Parent Signature	Contact Phone #
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Please return this form to the Front Reception Desk or Assistant Principal Office.
Or you may email Carla Villyard, 7th grade Assistant Principal at carla.villyard@cfisd.net

For AP Office Use Only

Date request was received: _____

Approved: Yes or No

Date locker was assigned: _____

Locker # assigned: _____