

**Home Visit Request & Report**  
Department of Safety & Security

| Requested By       | Position       | Phone Number/Extension  |
|--------------------|----------------|-------------------------|
|                    |                |                         |
| Request Type       |                |                         |
| Residency Check    | Wellness Check | Student/Caregiver Visit |
| Reason for Request |                |                         |
|                    |                |                         |
| Student Name       | School Name    | Caregiver Name          |
|                    |                |                         |
| Home Address       |                |                         |
|                    |                |                         |
| Home Phone         | Cell Phone     | Email                   |
|                    |                |                         |

**Results**

| Date of Visit      | Time of Visit | Safety Specialist |
|--------------------|---------------|-------------------|
|                    |               |                   |
| Report/Comments    |               |                   |
|                    |               |                   |
| Administrator Name |               | Date              |
|                    |               |                   |
| Action Taken       |               |                   |
|                    |               |                   |