

CHS Saturday School Permission Form

DATE: May 19, 2018

LOCATION: Churchland High School

BEGINNING TIME: 9:00 AM

ENDING TIME: 12:00 PM

PHONE NUMBER: 686-2500

ADMINISTRATORS: Derrick Watkins/Carie Hatfield

Please submit questions via email: Derrick.Watkins@pps.k12.va.us / Carie.Hatfield@pps.k12.va.us

****Transportation will be provided (See back for Bus Stops).***

****Please return form to the MAIN OFFICE by the Friday before the Saturday to be attended.***

PURPOSE FOR ATTENDING: PLEASE SELECT ONE

ATTENDANCE

TUTORING (Course Needed): _____

More than 10 absences in

Block: 1 2 3 4 **(Students must have work from the class they are making up**

attendance in and must remain the entire time to receive attendance credit/Students who do not have work will not be allowed to attend Saturday School)

I give permission for my child, _____, to attend Saturday School on (Please check all that apply) _____ May 19, 2018 from 9 AM to 12 PM.

Parent Contact:

Name: _____

Phone: (cell) _____ **(home)** _____

Email: _____

In the event that we are unable to contact you, please provide emergency contact information:

1. **Emergency Contact Name:** _____

Emergency Contact Phone: _____

Parent/Guardian Signature

Date