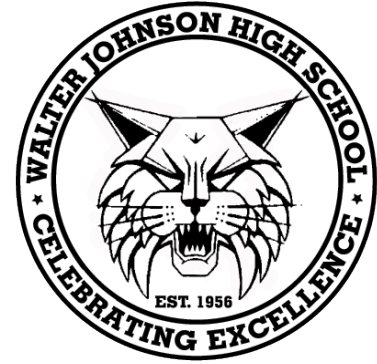


Walter Johnson High School
6400 Rock Spring Drive
Bethesda, MD 20814-1991



Office of the Principal

Office 301 - 803-7106
FAX 301 - 571-6916

<p><u>PRINT YOUR NAME:</u></p> <hr/> <p>Your MCPS ID #:</p> <hr/> <hr/>

Student Request to Participate in a Field Trip Away from School

I, _____, wish to be excused from classes on **Tuesday, November 10, 2009**
(Printed Student's Name)

from **9:15 a.m. to 11:30 p.m.** in order to participate in the following activity: **National Hispanic College Fair.**

I also agree to adhere to all MCPS and Walter Johnson High School policies while on the field trip. If it were to be discovered that I have an illegal substance or be under the influence of an illegal substance, the police will be notified and the appropriate action taken.

Transportation for this activity will be by:
 school bus

Bring a bag lunch to eat on the bus!!

Cost of the activity including admission is \$ **0 – NO COST! FREE! FREE!! FREE!!!**

I, _____, as parent or guardian, give permission for aforementioned student
(Parent or Guardian's Name Printed)

to participate in the activity and the mode of transportation described above. If transportation is other than MCPS school buses, please sign attached Application to Participate in an Activity Away from School for which MCPS Transportation is Not Provided

Parent or Guardian's Signature Date: _____

Staff Approval must be secured after parent/guardian signature -

Pd 1: **Not Applicable**

Pd 2: **Not Applicable**

Pd 3: _____
Teacher's Signature & Date

Pd 4: _____
Teacher's Signature & Date

Pd 5: _____
Teacher's Signature & Date

Pd 6: **Not Applicable**

Pd 7: **Not Applicable**

Please return this permission form (signed by you, your parent/guardian, and your teachers) to Ms. Blaine in the Career Center by:

Thursday, November 5, 2009.