

Non-CPS Student Date Approval Form

USE THIS FORM IF YOUR DATE IS A STUDENT AT ANOTHER MIDDLE/HIGH SCHOOL FORM **MUST** BE SUBMITTED A **MINIMUM OF 7 DAYS** PRIOR TO EVENT; *NO EXCEPTIONS*

| CPS Event: | | Ev | ent Date: |
|---|--|--|------------------------------|
| If the gues | t is a non- CPS student (attending m | niddle/high school), the completion of | this form requires: |
| 1. | Classical Prep student's signature | | |
| 2. | Signature of the student attending | g as a guest | |
| 3. | | | |
| 4. | | nt's school | |
| 5. | _ | or/dean attesting to the good standing | g of the guest. Please stamp |
| | signature with your school seal. | | |
| Printed nam | e of Classical Prep Student | | Student ID # |
| Signature of Classical Prep Student | | | Date |
| | | ical Prep student, I find his/her gues or the above named Classical Prep fo | |
| Printed name of Parent/Guardian of the Classical Prep Student | | itudent | Date |
| Signature of | Parent/Guardian of the Classical Prep Stud | ent | |
| Phone number (will be validated prior to event) | | | Email |
| Events Dre | ess Code. I understand that violating | must, and will, follow all school rules ng Classical Prep rules or the Formal I whom I am attending to be remove | _ |
| Printed nam | e of Guest | | Date of Birth |
| Signature of | Guest | Phone number | Date |
| **As a/the | <u> </u> | at | <i></i> |
| I confirm t | (Title/position) he student named above is in good | • | e of School) |
| Printed nam | e of School Official | | Phone number |
| Signature of School Official (with the school seal) | | | Date |