

EAST JUNIOR HIGH SCHOOL
AFTER SCHOOL TUTORING PERMISSION SLIP
Tutoring begins Wednesday October 11
MONDAYS AND WEDNESDAYS

Student name: _____ Grade: _____

Parent Name: _____

I give permission for my student to stay after school for AFTER-SCHOOL tutoring sessions as needed. I understand that the student may attend Math and ELA tutoring each Monday and Wednesday, or may choose to only stay after some Mondays and Wednesdays. I agree that as a guardian, my student and I will be responsible for communicating about when he/she is going to stay after school for tutoring.

There is no tutoring if after-school activities are cancelled or if school is closed.

My student will: (choose one)

_____ Take the **5:00 Activity Bus** home. The **Activity Bus** Number is _____

_____ Be picked up in the D lot at 4:45 pm. **If my child is not picked up by 4:45 pm, he/she will be required to take the Activity bus home. Please do not tell you child to wait for you past 4:45 – that will NOT be allowed. Uber and taxi pickups are also not permitted.**

Phone number at which parent/guardian can be reached: _____

Parent Email: _____

Parent Signature: _____ Date: _____