



Delaware Area Career Center
Student Exploration Day
Friday, March 8, 2019



Home School Permission Slip
(for half-day students only)

To the home school teachers of: _____

(Student's Name)

The above named student will be participating in a "Student Exploration Day" (job-shadowing) related to his/her _____ (name of CTE program) at the Delaware Area Career Center.

The activity will take place on Friday March 8, 2019 from 8:00 am to 2:15 pm. The student will return to classes at his/her home school on the next regular scheduled school day.

Instructor, Delaware Area Career Center

Contact Info. (Phone/Email)

The home school teacher's signature below indicates he/she has been notified of this activity.

Home school class period (obtain applicable signatures from home school teachers):

- | | |
|----------|-----------|
| 1) _____ | 6) _____ |
| 2) _____ | 7) _____ |
| 3) _____ | 8) _____ |
| 4) _____ | 9) _____ |
| 5) _____ | 10) _____ |

Notes:

- Home School Teachers: If you have questions about the activity – please contact the student's DACC CTE instructor.
- Student: Please return completed form to **your home school attendance office** by March 1, 2019.
- Attendance Office: Permission slip for the above activity, signed by the student's parent(s) will be handled by the Delaware Area Career Center.