

HEBRON HIGH SCHOOL

Senior Off Period Parent Consent

Hebron High School seniors must read and complete the following information to be granted an Off Period.

Student Name _____ ID# _____

Period Requested Off (circle): 1st or 4th

Student's Counselor: _____ Nine Weeks Period: 1 2 3 4

Seniors/Parents of seniors who are requesting an off period must sign that they understand and comply with the following:

- I understand that the counselor will not schedule the student with an off period if they are still requiring credits to graduate. A senior off period counts as **No Credit** to the student.
- The student must have reliable transportation. **The student with 4th period off is expected to leave the campus immediately after third period is over.** Student may not wait in the Library, Cafeteria, or any other location on the school grounds during the Off Period.
- Teachers pass to library allowed on occasional basis.
- Students who do not comply will be subject to disciplinary action.

My signature reflects that I have read the information above, and that I comply with these requirements.

Student Signature _____ Date _____

Parent Signature _____ Date _____