## After School Academic Support Permission Slips

Student's Name		
has my permission to sta	y after school on(date)	
for After School Academ	nic Support. He/She will be picked	
up by 4:00 pm by		
	Parent Signature	
	y after school on	
for After School Academ	nic Support. He/She will be picked	
up by 4:00 pm by	•	
1 7 1 7		
	Parent Signature	
has my permission to sta	y after school on(date)	
for After School Academ	nic Support. He/She will be picked	
up by 4:00 pm by		
1 3 1 3		
	Parent Signature	
Student's Name		
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up by 4:00 pm by	-	
	Parent Signature	