



WILSON HIGH SCHOOL

2601 Grandview Boulevard

West Lawn, PA 19609-1324

610-670-0180

OPEN CAMPUS PERMISSION FORM

Student: _____
(Last Name) (First Name)

Students will have the opportunity to leave campus with approval from their parent/guardian and administration following submission of this permission form. The criteria necessary to apply for eligibility of open campus is below.

Students that meet **all** of the criteria below will be able to leave school during a study hall.

1. Parent Sign Off form signed by parent/guardian and student
2. **Schedules will not be adjusted** to move study halls to certain periods in the school day
3. When a student with a valid open campus pass leaves school, the school district's responsibility for the student's welfare is waived until the student returns to school.
4. Students must sign out / sign in using the Wilson High School Google Form.
5. Permission to leave school at open campus time will be revoked by the school authorities for the reported violation of any of the above conditions. Additional disciplinary action may also be taken in accordance with the school's disciplinary regulations.

Based on a full understanding of the above stated conditions, _____ (Print Student Name), is hereby **granted permission** (please sign below) to leave the high school during the open campus period during the school year.

This is a privilege that can be revoked at any time at the administration's discretion. Strict adherence to school district policies and procedures is expected in order to enjoy the Open Campus privilege.

THE UNDERSIGNED ACKNOWLEDGES HAVING READ AND UNDERSTOOD THE STATED RIGHTS AND REGULATIONS LISTED ABOVE:

Student Signature Date

Parent/Guardian Signature - **PERMISSION GRANTED** Date

Administrator Signature Date

****SIGN AND RETURN TO THE HIGH SCHOOL OFFICE****