LETTER TO PARENTS

Dear Parents:

The Child Care students will be participating in the community schools for a two week period, __________ (dates) ___________. Each student will attend a preschool, kindergarten, child care center, or special needs classroom for six class periods. We believe this experience will be beneficial to our students by providing them with an opportunity to work with children involved in an actual situation.

We need your permission for your son/daughter to leave the high school and not hold the school or the driver liable if an accident should occur. Your student may also need to drive, occasionally. In this case, we must have proof of insurance coverage. A form for this verification is found on the following page.

Please sign the bottom of this note and return it to me if these conditions meet your approval. I will send notes home when your student needs to drive, if you wish.

Thank you,

Student’s Name 

Parent’s Signature 

____ My student has permission to drive whenever he/she needs to do so.

____ I wish to be notified of the days my child is expected to drive.