



## Parent / Guardian Permission Slip

Student Name: \_\_\_\_\_

I understand that I am responsible for my student's transportation to and from tutoring / mentoring activities. I hereby give permission and support for my student to participate in the Pleasant Hill High School A+ Schools Tutoring / Mentoring Program.

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Date

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My child is 16 or older and has my permission to drive to and from tutoring sessions.

\_\_\_\_\_  
Parent / Guardian signature

\_\_\_\_\_  
Date

**Please complete and return to Chris Purnell, A+ Coordinator**