



**Parental Off-Campus Noon Permission / Pass  
for Juniors and Seniors  
2009-10 School Year**

**Name of Student** \_\_\_\_\_

**As parent or legal guardian of the above named student I hereby give permission for him/her to leave the LSA campus during the noon hour.**

**I also give permission for him/her to leave campus during fifth period immediately prior to lunch, and/or sixth period immediately following lunch if he/she has no classes.**

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**Printed Name of Parent/Guardian**

**Signature**

**Date**

9/30/09