

**PARENTAL/CAREGIVER PERMISSION FOR STUDENT  
PLACEMENT ON AN ALTERNATIVE EDUCATION PROGRAM**

Student: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

As a result of formal and informal assessment and consultation with parent(s)/caregiver(s), teachers and educational personnel, it is the recommendation of the educational team that your child be placed in the Alternative Education Program described below {include grade level and specific course(s) 18, 28 or 38}.

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**Parental Consent Statement**

I clearly understand the recommendation and hereby give permission for the Alternative Education placement described above. I understand the rationale for and the implications of this placement and realize that my child:

- a) will be working on Alternative 18, 28 or 38 level course(s) and other agreed-upon courses;
- b) may not meet the current admission requirements for post-secondary educational institutions and programs; and,
- c) may discontinue the Alternative Education Program; however, my child will be required to complete all Regular Education courses in order to graduate with a Regular Education Grade 12.

Date	Signature of Parent or Guardian
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**This form must be completed at the beginning of each school year and filed in the student's cumulative file.**