

Kamehameha Schools Maui
Student Activity Permission Form
Counseling Department – High School

I wish to be excused from class on September 14 ,2012 I know I am responsible for missed work and assignments.

Activity: Creighton University Visit Time: 11:30am (block 3)

Location: Pauahilani Counseling Center

Student Name: _____ Date: _____

Student Signature: _____ Student ID#: _____

Counselor Signature: _____ (Teacher signature required in
Granted/Denied box below)

Block	Granted	Denied
1		
2		
3		
4		

Time student reported: _____ Time student left activity: _____

INSTRUCTIONS: Responsibility for origination this request form rests with the student who will secure the approval of the classroom teacher with whom the final decision rests. Use this form as your **PASS** for the scheduled meeting time.

***The maximum amount of students allowed for each college visit will be 30 students. This allows the colleges to become better acquainted with the students. Please make sure you present this SIGNED pass at the visit. ALSO, you must have signed up on the college visit sign-up sheet for this college. Having this pass and not on the list will result in you returning back to class.**