



Parental Consent Form for Student Participation in the Pepco Guiding Light Leadership Program 2013-2014 School Year

Dear Parent/Guardian,

As part of the Pepco Guiding Light Leadership Program, if selected, your son/daughter will be participating in three one-day sessions during the months of February 2014, March 2014 and April 2014 at Pepco's headquarters, 701 Ninth Street, NW, in Washington, DC 20068.

Please provide us with the information requested below.

1. In case of emergency, list two persons to be contacted:

a) Name of Parent or Guardian _____ Relationship _____
Address _____
Phone (Day) _____ (Evening) _____ (Cell) _____

b) Name _____ Relationship _____
Address _____
Phone (Day) _____ (Evening) _____ (Cell) _____

2. Does your child have a medical condition or history with which we should be familiar?

Yes _____ No _____

If yes, please describe on back of form or submit separate statement, if necessary.

3. Does your child require medication? Yes _____ No _____

If yes, please note provisions that you will make and any information with which we should be aware. Use back of form or submit separate statement, if necessary.

4. Does your child have any dietary restrictions? Yes _____ No _____

If yes, please describe on back of form or submit separate statement, if necessary.

5. [] I give my child (Name,) _____, permission to participate in all program-related activities.

[] I understand and commit to ensure that my child has transportation to Pepco's main office at 701 Ninth Street NW, Washington DC for all program-related activities.

Parent/Guardian Printed Name _____

Parent/Guardian Signature _____ Date _____

Return completed application and materials by January 11, 2014 :

MCPS Educational Foundation, Inc.
MCPS Educational Foundation Inc., Scholarship Program/PEPCO
850 Hungerford Drive, Room 149
Rockville, Maryland 20850