

FAIRFAX ACADEMY STUDENT VISITOR PASS

Must present this pass to visit

Name of Student: _____ Date To Visit: _____

Current Grade: _____

Base School: _____

NO TRANSPORTATION OFFERED 2012/2013

Class visiting: _____ *(Must choose only one Class/Block to visit)*

When signed by both parent and base school counselor, this pass will be considered authorization to ride a shuttle bus and will also serve as a permission slip for the purpose of attendance. Good for one block visit.

Parent Permission: _____ Counselor Signature: _____

This visit prearranged through the Base school Counselor. Academy contact person: Ms. Shanley in the Academy office (703) 219-2226

PRE-ARRANGED ABSENCE FORM

_____ will be visiting Fairfax Academy. She/He would like your permission to miss class in order to participate in this opportunity. All students understand they are responsible for all class assignments.

Date _____

PERIOD	TEACHER	APPROVAL/ASSIGNMENTS
1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____
6	_____	_____
7	_____	_____

Please keep this form with you and available for review, as you travel to and from Fairfax Academy