

## Donald A. Wilson Secondary School Students Over 18 Permissions



## SECTION A: ATTENDANCE PRIVILEGES

(name of student), who is eighteen years of age or older, has requested permission to take responsibility for their attendance at Donald A. Wilson S.S. They would have the privilege of signing in or out of school without parent/guardian approval, and they would also be able to report their own absences and sign other documents related to school. It is important to give serious consideration to the responsibilities associated with this decision.

We expect all students to maintain good attendance punctuality and follow the proper procedures for absences/lates as outlined in the student agenda. Misuse of this privilege will result in its loss.

As a mature student, I, \_\_\_\_\_\_ understand that I must maintain good attendance/punctuality and follow the proper attendance procedures, or I will be subject to the appropriate disciplinary consequences. I understand that if I abuse this privilege, it will be revoked.

Your signature below approves and acknowledges receipt of this information.

## SECTION B: COMMUNICATION WITH HOME

As a mature student (18 years or older), I \_\_\_\_\_\_\_ request that <u>NO</u> teacher, guidance counselor, or administrator of Donald A. Wilson SS release any attendance, achievement, behaviour, or other information relevant to my success at school to my parents/guardian. <u>I agree to inform my parents/guardians of this decision through conversation and obtaining their signature indicating they are aware of the legal change.</u> Please provide your phone number and email address to receive your electronic report card and regular school newsletters and invitations.
Phone number: \_\_\_\_\_\_ email address: \_\_\_\_\_\_

<u>OR</u>

As a mature student (18 years or older), I \_\_\_\_\_\_ give permission for my parent/guardian to receive information from a teacher, guidance counselor, or administrator of Donald A. Wilson SS regarding any attendance, achievement, behaviour, or other information relevant to my success at school. <u>I</u> agree to inform my parents/guardians of this decision through conversation and obtaining their signature indicating they are aware of the legal change. Please provide your phone number and email address to receive your electronic report card and regular school newsletters and invitations. Phone number: \_\_\_\_\_\_ email address: \_\_\_\_\_\_

## Please return completed and signed form to the main office.

Student's Signature

Date

Parent/Guardian Signature

Administration Signature

Date