

**APPLICATION FOR OPEN & OFF CAMPUS PRIVILEGES FOR THE 2010-2011 School Year  
OFF CAMPUS CONTRACT FOR SENIORS – CLASS 2011**

**PARENT AUTHORIZATION**

I have read and understand the procedures, obligations, and responsibilities related to the **OPEN AND OFF CAMPUS PROGRAM** as stated in the information sheet entitled **“OPEN CAMPUS INFORMATION.”** Furthermore, I am aware that seniors on open campus may also have off-campus privileges. If I have not written a note to the contrary in the space below, my signature indicates that I authorize off-campus privileges as part of open campus for my son/daughter.

With this knowledge, I authorize \_\_\_\_\_ to **PARTICIPATE** in the **OPEN AND OFF CAMPUS PROGRAM**, and I assume full responsibility for his/her when he/she is unassigned to a class.

**NOTE:** \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_ Signature of Parent/Guardian

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**STUDENT AGREEMENT**

I have read and understand the procedures, obligations, and responsibilities related to the **OPEN/OFF CAMPUS PROGRAM** as stated in the information sheet entitled **“OPEN CAMPUS INFORMATION.”** I also understand that upon the sole discretion of the school, my parent/guardian, and/or the administration, all or part of the open campus privileges extended to me may be limited or removed. Restrictions may be imposed should my conduct, attitude or performance be inconsistent with the conditions or intent of open campus. Finally, I understand the open campus privileges will not be in effect until I receive written authorization to that effect from the main office.

\_\_\_\_\_ Date \_\_\_\_\_ Signature of Student

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**STRUCTURED CONTRACT**

I **DO NOT AUTHORIZE** \_\_\_\_\_ to participate in the Open Campus Program. I understand that he/she will be assigned to a study hall during all non-assigned blocks.

\_\_\_\_\_ Date \_\_\_\_\_ Signature of Parent/Guardian

\_\_\_\_\_ Signature of Student

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**FOR OFFICE USE ONLY**

- \_\_\_\_\_ Open Campus Authorized
  - \_\_\_\_\_ Off Campus also Authorized
  - \_\_\_\_\_ Notification to Student
  - \_\_\_\_\_ Open Campus Not Authorized
  - \_\_\_\_\_ Off Campus Not Authorized – Reason \_\_\_\_\_
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**IF THIS SHEET IS NOT RETURNED TO MR. WEINSTEIN BEFORE THE END OF THE 2009-2010 SCHOOL YEAR, STUDY HALLS WILL BE ADDED TO YOUR SCHEDULE FOR QUARTER ONE OF THE 2010-2011 SCHOOL YEAR. THANK YOU.**