

## Leaving School Grounds Permission Slip

As the parent/guardian of \_\_\_\_\_, I grant permission to the Cayuga-Onondaga BOCES Alternative Education Program to supervise my son/daughter in activities that may be off school grounds while enrolled in the program. This may include walks, field trips, or tours of other sites in the BOCES program. I understand that some of the activities will utilize transportation by BOCES staff. An additional permission slip will be sent out for field trips with information about the activity.

\_\_\_\_\_  
Program Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

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### Field Trip Permission Slip

I, \_\_\_\_\_ grant permission for my child, \_\_\_\_\_  
Parent/Guardian Child's Name

to attend any field trips that are under the supervision of a certified staff member.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date