

The Bridge

Bridging the gap

2017-2018

Permission Form

Student Name:	Grade:
Parent /Guardian:	Home phone:
Subject(s) and specific areas of concern:	Cell phone:
What do you hope to gain from having your child participate in this program?	Email:

I, _____ give permission for _____ to participate in the Bridge program. I agree to ensure that my child attends his/her scheduled tutoring sessions. I understand that my child must sign up 2 days in advance to attend a tutoring session. If my child misses 3 scheduled tutoring sessions, tutoring will be discontinued.