PERMISSION TO LEAVE FORM

Remit to: Director of Residential Life
email: rwint@nationalsportsacademy.com
Phone: 518-523-3460 ext 59 Fax: 518-523-3488

Name		Today's Date	
Reason			

☐ **I will <u>not</u> be missing any classes.**

OR

☐ **I will be missing classes.**

Step 1) I have Lisa Wint's approval to miss class. _____

Lisa Wint, Director of Academic Affairs Date

Step 2) I have informed my teacher/s & Coach and have obtained their signatures as shown on next line.

Eng._____ History_____ Math_____ Science_____ Foreign Lang._____ Other_____ Coach _____

☐ **I have informed** Randy Wint _____

Randy Wint, Director of Residential Life Date

☐ **My campus Job** is: _____and my Substitute is: _____

Student's Name

Departure Information:

Time			Date (mm/dd/yy)	Adult Driver
Leaving		AM PM		
Returning		AM PM		

Destination Information:

Responsible Adult		Phone #	
Address			
Driver/Carrier Leaving			
Driver/Carrier Returning			

Permission to Drive/Ride with a NSA Student:

NSA boarding/ day students may not travel in automobiles at all during the academic day. No NSA student is to drive or ride with another NSA student without permission from both sets of parents in writing. Additionally, no NSA student may ride with anyone but a faculty/staff member or family member, unless specific written permission is granted by a parent/ guardian for <u>each</u> occasion.

I _____ am writing to give my child_____

Parent/Guardian Student's name

permission to **drive/transport** or **be driven/transported by** _____

(circle one) Name

on a trip to _____

Destination

Parental Permission for Leave:

Signed: _____ Date: _____

Parent/ Guardian

***** This form may be printed and faxed to school or printed, completed, scanned and then emailed to the address at top.

Note: Returning to school is prohibited for the duration of this leave form.