



# GABRIEL RICHARD CATHOLIC HIGH SCHOOL

## Shadow Visit: Parent Authorization

Shadowing is an excellent opportunity for prospective students to experience a “day in the life” of a student of Gabriel Richard. Any student participating in this program must have permission from Gabriel Richard and his/her parent or guardian to attend.

Please Note: There will be no visits scheduled on SPECIAL ACTIVITY DAYS unless approved by the principal or director of admissions. To help us prepare for your student’s visit, all requests must be submitted and approved at least two school days in advance of the requested date. All guests are required to check in at the main office upon arrival. If you have any questions, please contact the GR Admissions Office at 734-284-3636. We look forward to your visit and hope you enjoy the day.

**GENERAL INFORMATION:** Name of visiting student: \_\_\_\_\_  
(Please print clearly)

School currently attending: \_\_\_\_\_ Grade: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Parent E-mail: \_\_\_\_\_

Date of requested visit to GR: \_\_\_\_\_ T-shirt size: \_\_\_\_\_

We pair our shadow guests with GR students who have similar interests or are involved in similar activities. Please tell us about your student’s class/academic interests:

\_\_\_\_\_

What are your student’s extracurricular/athletic interests? \_\_\_\_\_

At the conclusion of your student’s shadow visit, would he/she like to stay after school to observe a club or athletic team practice? If so, which one? \_\_\_\_\_

Is there a freshman or sophomore student at GR your son/daughter would like to shadow? (If so, please list and we will try to accommodate your request.): \_\_\_\_\_

**PARENT AUTHORIZATION:** (Please be sure to let your son/daughter’s school know that he or she will be absent on the day of their visit to Gabriel Richard. If you need a letter to present to your child’s current school, please let us know in advance of your visit.)

My son/daughter, \_\_\_\_\_, has my permission to attend Gabriel Richard Catholic High School for a Shadow Visit. I am aware that my son/daughter is expected to follow the rules and regulations set forth in the GR Student Handbook as it pertains to appropriate classroom behavior and student dress code.

In the event of an emergency, I may be reached at the following number: \_\_\_\_\_

Special Notes/Instructions: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Please Print Name of Parent/Guardian