



**ALBUQUERQUE PUBLIC SCHOOLS**

Practical Nursing Program

Career Enrichment Center

*Expect Great Things!*



Patrick Arguelles  
PRINCIPAL

Rebecca Tawney Weatherford  
MSN, FNP-BC

## TRANSPORTATION PARENT/GUARDIAN PERMISSION FORM

The parent/guardian of \_\_\_\_\_ consents to providing transportation to and from CEC and all the clinical sites during the 5 (five) semester APS CEC Practical Nursing Program.

The parent/guardian is fully aware that the student must be at the clinical rotation sites at the assigned times during the school week. The parent/guardian agrees to cooperate so that the student arrives at the assigned location for the time designated and returns thereafter to the home high school or home.

The parent/guardian and student do hereby accept, by agreement, that in the event of an accident involving the student, that the teacher in charge, any assistants, the school, or the Board of Education of the Albuquerque Public Schools, will not be held liable for any damage or expenses incurred by said accident.

The parent/guardian further agree to the indemnity and hold harmless the teacher, any assistants, the school, or said Board of Education from all claims and demands made by or for the student as a result of said accident.

The parent/guardian hereby assumes financial responsibility for hospitalization and medical treatment, physician or dentist.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Home Telephone

Rebecca Tawney Weatherford MSN, FNP-BC  
Program Director