

Student Name _____

ID# _____

Lunch _____

EHS Senior Lunch Privileges – 1st Semester

Congratulations, Senior! Beginning **September 3, 2024**, you will be allowed to leave campus for lunch as long as you meet the minimum requirements, maintain consistent attendance, and have permission from your parent/guardian. **You may not sign for yourself if you are 18; a parent/guardian must still sign this form.** Please read over the requirements and have your parent/guardian sign then return it to the Activities Office **by Friday, August 28, 2024 for approval.** You may ***NOT*** leave during lunch unless you have been approved. If your ID card with the lunch pass is lost, stolen, washed, etc., a new pass ***WILL NOT*** be issued. **No late applications will be accepted!** **This application applies only to 1st Semester, you must reapply 2nd Semester.**

Requirements:

- 1. You must have earned at least a 3.0 GPA your last semester.**
- 2. No major discipline issues this year or your junior year.**
- 3. You will not be allowed to leave for lunch for the remainder of the semester if you have more than three tardies to your class immediately following your lunch.**
- 4. This paper is signed by parent/guardian and returned to the Activities Office for approval by **August 28, 2024****
- 5. Approval given by Activities Office.**

*Your off-campus privileges may be revoked at any time if it is determined by administration that you have broken Board Policy. Parents may also revoke their students' privilege.

I understand that it is my responsibility to maintain my grades and to follow Board Policy in order to leave campus for lunch my senior year. I also understand that my privileges may be revoked by administration at any time, if deemed necessary. Finally, I agree to return to school and class in a timely manner.

Student Name _____ Signature _____ Date _____

By signing this paper, I understand the responsibilities my student has with regards to leaving campus for lunch. I also understand that my student's privileges may be revoked at the discretion of administration.

Parent Name _____ Signature _____ Date _____