

Iroquois Central High School

SENIOR PRIVILEGE PERMISSION – 2025/2026

Student Name: _____

Senior Privilege is a special opportunity granted to senior students who are considered to be in good standing by meeting the criteria listed below. The criteria are reflective of a student's first three (3) years at Iroquois High School.

On the back of this form indicate the periods of the school day that you are requesting Senior Privilege. This form will be reviewed by a Principal. Note that Senior Privilege can **ONLY** be requested for Study Hall periods that are assigned **at the beginning and/or end of the day**. Study Hall periods in the middle of the school day **CANNOT** be assigned as Senior Privilege. Please request both 1st & 2nd semester as on your schedule for study halls.

Return this completed & signed form to the Main Office. We cannot change a student's schedule without parental permission.

Senior Privilege is granted if the following conditions are met:

1. I am able to provide my own transportation. **Parking Tag #**_____
2. I maintain an overall average of at least 80%, and a passing grade of at least 65% in **every** subject. Administration will monitor this throughout the year and student will lose privilege if the grades are not maintained. **Student Initial:**_____ **Parent Initial:**_____
3. I adhere to the Code of Conduct. I understand that I may lose my Senior Privilege if I do not adhere to the Code of Conduct.
4. I adhere to the attendance policies in the High School handbook. Excessive absences or tardies may result in students losing Senior Privilege. **Student Initial:**_____ **Parent Initial:**_____
5. I do not remain in the building unsupervised. When I am scheduled to have Senior Privilege, if I do not have transportation on that day or am staying for an after-school activity, I will report to the library.
6. I must sign in and out in the Attendance Office when I have Senior Privilege.

I agree to abide by the conditions of this privilege and understand that failure to maintain any of these **will result in a loss of Senior Privilege for the remainder of the quarter and until the student is back in good standing.**

Student signature: _____ Date: _____

Parent signature: _____ Date: _____

Student Name: _____

FIRST SEMESTER (*September - January*)

I request permission to **arrive at school late**. I will arrive at _____ period.

I request permission to **leave school early**. I will leave at the end of _____ period.

SECOND SEMESTER (*February - June*)

I request permission to **arrive at school late**. I will arrive at _____ period.

I request permission to **leave school early**. I will leave at the end of _____ period.

High School Main Office: The student named above adheres to the Attendance Policy and Code of Conduct.

The student has completed at least 24 hours of community service and is passing **every** subject and was not on the failure list at the end of the 4th quarter.

Signature: _____ Date: _____
HS Assistant Principal

High School Main Office: The student named above currently has an Iroquois HS parking permit.

Parking tag # _____ No parking tag – parent will provide transportation: ☐

Signature: _____ Date: _____
HS Main Office