



Menomonee Falls
High School

AGE OF MAJORITY

ACCEPTANCE OF RIGHTS & RESPONSIBILITIES

I recognize that as a student of majority age, I may assume the rights as well as the expected responsibilities of parents of minor students. I understand that I may sign all permission slips and forms requiring a parent's signature.

I further understand that it is my responsibility to make every effort to attend class daily and on time. I shall abide by the Code of Conduct of the school, and I understand that my parents may be contacted if I am found in violation of school rules, which can include:

- · Following school guidelines for leaving school during the day
- · All medical absences must be substantiated by an excuse from a medical provider
- · Absences will not be excused due to oversleeping or missing your bus/ride
- · Attendance issues must be addressed within two school days
- · All other rules outlined in the Student Handbook

By signing this paperwork, I am agreeing to the rules and expectations outlined in the Student Handbook. My parents will be allowed access to my records, but I will make decisions independently of my parents.

Student (Printed Name): _____

Student Signature: _____

Student Cell Phone #: _____

Student Email: _____

Date of Birth: _____

Parent Signature: _____