

Student Name: _____
Long Student ID: _____



OFF-CAMPUS LUNCH PERMIT (OCP) APPLICATION
2026-2027

PRIVILEGE WILL BEGIN THE SECOND WEEK OF SCHOOL - MONDAY, AUGUST 31st

To the parents/guardians of Seniors:

With the consent of said parents/guardians, Seniors at Upland High School will be permitted to leave campus for lunch by presenting their official UHS Student Off-Campus Permit (OCP) to exit and re-enter campus. Students must leave through the "Senior Gate" on the San Antonio side of the school. Students must have their OCP in possession whenever they leave and re-enter campus. The card permits Senior students to leave campus at lunch only. It is **NOT** a permit to leave campus **at any other time** during school hours.

Students must have their OCP in their possession whenever they leave and re-enter campus.

An OCP may be suspended or revoked by UHS for violating behavior and/or attendance expectations, which include, but are not limited to:

1. Discipline Referrals
2. Excessive tardies and/or truancies
3. Suspension for violation of the Education Code
4. Disorderly conduct toward peers or faculty/staff members
5. "Lending" their OCP to underclassmen or other seniors
6. Receiving an "F" grade
7. Disorderly conduct during off-campus lunch time/school activities
8. Misconduct on or off campus
9. Unserved Saturday Schools or detentions
10. A student on academic probation or ineligible to participate in extracurricular activities

If you **APPROVE of this privilege**, please sign and return the form below during Registration. If you are unable to complete this during registration, you may turn it in to the Student Store so you can receive your OCP.

Sincerely,

Brian Chavez Brian_Chavez@upland.k12.ca.us
Laura McMullen Laura_McMullen@upland.k12.ca.us

Deans of Student Services

PLEASE CHECK BELOW:

_____ I APPROVE my child to have an OFF-CAMPUS PASS (OCP). I have read, and I agree to the above provisions for an Off-Campus Pass. I realize that a violation of the above policies may result in that privilege being revoked.

SIGNATURES	Date:
Student:	
Parent/Guardian:	Date: