# Open-Campus Lunch Parental Consent Form

**Student Name:** _____

**Student ID:** _____

**Grade Level:** _____ **School Year:** _____

**Campus:** _____

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Fort Worth ISD's open-campus lunch policy is governed by **Board Policy FEE (LOCAL)**. Under this policy, students in **Grades 11–12** may be granted permission to leave campus during their designated lunch period, subject to campus rules and regulations established by the principal and school leadership team, and with parental consent.

Parent/Guardian Acknowledgment: By signing this form, I acknowledge and understand the following:

1. Open-campus lunch privileges are available only to eligible students in **Grades 11–12**, subject to campus approval and District policy.
2. My student must comply with all campus and District rules, regulations, and expectations while participating in open-campus lunch.
3. The District is not responsible for my student's transportation, activities, or supervision while the student is off campus during the lunch period.
4. Students who leave campus without authorization or fail to follow established procedures may be subject to disciplinary consequences in accordance with the **Student Code of Conduct**.
5. Campus and District leadership retain the authority to modify, suspend, restrict, or revoke open-campus lunch privileges at any time due to safety, operational, attendance, or student discipline concerns.
6. Permission granted through this form remains in effect for the current school year unless revoked in writing by the parent/guardian or the campus administration.

## Parent/Guardian Authorization

I, _____, am the parent/legal guardian of the student named above. I have read and understand the District's open-campus lunch expectations and procedures. I grant permission for my student to participate in open-campus lunch, subject to District policy and campus guidelines.

**Parent/Guardian Signature:** _____

**Date:** _____

**Phone Number:** _____

**Email Address:** _____

Fort Worth
INDEPENDENT SCHOOL DISTRICT