

**Prior Consent and Intention to Participate  
Job Shadow/Take Your Child to Work Day  
February 2017**

*My son/daughter will participate in the Job Shadow/Take-A-Child-to Work event on **a date of my choice during the month of February**. This event will give students an opportunity to have a first hand look at the world of work. **I agree to support this event by: taking my child to work; assisting in securing a valuable workplace for my child to visit; or obtaining a commitment from a reputable, professional and /or business for my child to shadow during the workday.** I will encourage my son/daughter to be on time, polite, courteous, and to act in a professional manner during the shadowing event. **Students must return completed forms to Mr. Jenkins before participating in this school to work event. Prior approval is mandatory.***

**Parent/Guardian Signature:** (Use pen) \_\_\_\_\_

Work Telephone \_\_\_\_\_ Home Telephone \_\_\_\_\_ Mobile \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_ E-mail \_\_\_\_\_

Do you have your own transportation? Yes \_\_\_\_\_ No \_\_\_\_\_

**Students Name:** (Print, no nicknames) \_\_\_\_\_ **Homeroom Teacher** \_\_\_\_\_  
(Legal First and Last Name)

**Students top three career choices.** Examples: Doctor, Police Officer, and Engineer.

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**If you know someone you would like to shadow, please list his/her name.** \_\_\_\_\_

To be completed by the place of business-Please print clearly

Name of Business: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Name of contact person and telephone number: \_\_\_\_\_

Name of person student will shadow if different from contact: \_\_\_\_\_

Describe Career/Job student will shadow: \_\_\_\_\_

Time student will report to work: \_\_\_\_\_ Time student will leave work: \_\_\_\_\_

**Will lunch be provided? Yes or No:** \_\_\_\_\_

**To Business Host:**

I agree to partner with Fuquay-Varina Middle School in order to participate in Take Your Child to Work Day by hosting the above named student. If I have questions, I will contact Rodney Jenkins at (919) 557-2755.

**Signature of Host/Business Contact:** (please use pen) \_\_\_\_\_