



Student Guest Day Permission Form

To familiarize prospective students with the career and technical education programs offered at Mercer County Technical Schools, students may visit as a guest. Before permission is granted for any student to visit, the information below must be completed and submitted to Mercer County Technical Schools and the sending school office. **Permission slips must be on file at the appropriate center before a guest student can visit. On visitation day, guest students must report to the Main Office for a visitor pass.**

STUDENT INFORMATION

Date of Visit _____ Program(s) to be visited _____

Session _____ Current School _____ Grade _____

Student Last Name (please print) _____ First Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Birthdate ____ - ____ - ____ Age ____ Gender ____
male female

Emergency Contact Name _____ Emergency Contact Phone _____

HEALTH INFORMATION

For reference in the event of an emergency, I state that I have the conditions checked as follows:

Glasses/Contacts ___ Yes ___ No Seizure Disorder ___ Yes ___ No Medication Required _____

___ Allergies: Epipen Yes/No Medication _____ Insects _____ Food _____

Asthma: ___ Yes ___ No Medication Required _____

___ Diabetes: Glucagon Yes/No Insulin Coverage _____ Dietary Restrictions _____

List any medical conditions or medications not mentioned above:

PARENT/GUARDIAN CONSENT

I understand that relevant information regarding my child's health may be shared with appropriate school personnel and other healthcare providers as necessary. In the event of serious illness or injury, the school will make every effort to contact the parent/guardian. Should the parent/guardian be unavailable, the school principal is authorized to have my child transported to a medical facility for treatment. I will not hold the school district financially responsible for the emergency care and/or transportation for said child. Permission is granted for the student listed above to participate in live shop work that may include exposure to heavy landscaping equipment, kitchen cutlery, hot equipment, hand and power tools and chemicals.

Parent/Guardian Name (Please print)

Parent/Guardian Signature