**Upper Scioto Valley High School**

**Request to Attend a School Sponsored Event**

**Event:** Homecoming **Date:** 10/9/21 **Location:** USVAuditeria

**Return this form to the high school office on or before: Wednesday, October 6, 2021**

Any student requesting to bring a date who is not a student at Upper Scioto Valley must have this form completed and returned to the high school office on or before the above date. This form requires the signature of the Administrator of the guest student’s school, the guest, the USV student and the parent or guardian of the USV student. Incomplete forms will not be accepted.

1. **Upper Scioto Valley Student:** As an Upper Scioto Valley student, I understand that USV school rules apply at ALL school events and activities. I take full responsibility to inform and ensure full compliance of these rules by my guest.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Printed Name Grade Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Signature Phone #

1. **Upper Scioto Valley Parent/Guardian:** As the parent/guardian of the above named Upper Scioto Valley student, I find his/her guest to be a respectful, responsible person and I approve of him/her as an acceptable guest for the Upper Scioto Valley school sponsored event.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Printed Name Phone #

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature Date

1. **Guest:** As a guest at an Upper Scioto Valley event, I am willing to accept and abide by the policies and procedures of Upper Scioto Valley Local School District. I understand that failure to follow these rules will result in my removal from this event and may jeopardize my ability to attend any future events at Upper Scioto Valley High School.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Guest Printed Name Grade Birthdate

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Guest Signature Phone #

1. **Administrator of Guest:** As an administrator at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, I verify that the above named guest is a student in good standing. This individual is known to be of good character, and in my professional opinion, he/she will abide by the established rules of Upper Scioto Valley Schools.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Administrator Signature Phone # Date