



# Jackson High School Guest Pass



Event: Sweetheart Dance

Date of Event:

Friday February 9<sup>th</sup>, 2018

The purpose of this endorsement is to allow Jackson High School students to attend high school activities with guests who will conduct themselves within the guidelines of Jackson High School and the JHS Code of Conduct in the JHS Handbook. One guest is permitted per JHS student. All guests must be at least in high school and no older than 20 years old. All guests must be approved by a school official.

**Please fax the signed sheet to (740) 286-8197.** Thank you for your cooperation.

This form must be signed and returned to the Principal's Office at least **five school days** before the event **(due by 12:30 PM Friday, February 2<sup>nd</sup>, 2018).**

JHS Student Name: \_\_\_\_\_

JHS Student Grade: \_\_\_\_\_

I understand that if my guest violates any portion of the JHS Code of Conduct I will also be dismissed from the dance and discipline may apply.

\_\_\_\_\_  
(Signature of JHS Student)

As the parent/guardian of the above JHS Student, I find his/her guest to be a responsible person, and I recommend his/her guest as an acceptable guest for this Jackson High School Dance.

\_\_\_\_\_  
(Signature of JHS Student's Parent/Guardian)

**Only complete one part (A or B).**

**A – High School Guest**

Name of Guest: \_\_\_\_\_

Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

The above student has been invited to the \_\_\_\_\_ JHS Sweetheart Dance by \_\_\_\_\_

to be held on Friday February 9<sup>th</sup>, 2018.

\_\_\_\_\_  
(JHS Student)

Your signature will certify that the above named guest is in good standing and has good moral character.

\_\_\_\_\_  
Signature of Guest's Principal

\_\_\_\_\_  
Name and Phone Number of High School

**B – Out of School Guest (Guest Not Attending a High School)**

If a guest is not enrolled in high school, this section is to be signed by a school official. **Guest must not be over the age of 20.** Additional documentation (driver's license, etc.) may be required to verify the identity of the guest.

Guest Name: \_\_\_\_\_

Address: \_\_\_\_\_

License Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

\_\_\_\_\_  
(Jackson High School Official's Signature)

Approved

Disapproved