



LAKE VIEW HIGH SCHOOL

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Paul J. Karafiol, Principal

Melissa Resh, Asst. Principal

Dania Saleh, Asst. Principal

Meghan Sovell, Asst. Principal

Lake View High School

Student Shadow Parent/Guardian Permission Slip

With great pleasure, we invite your student, a 7th or 8th grader interested in learning more about Lake View High School, to visit us for a Shadow Day. Please submit the Parent/Guardian Permission Slip prior to your student's visit by returning the form to the Main Office. **We will contact you to notify you of the scheduled date for the Student Shadow Visit.** Direct any question or concern to our Director of Community and Student Affairs, Erin Kitson, at eckitson@cps.edu

Go Wildcats!

Student Name	<input type="text"/>		
Student Email	<input type="text"/>		
Current Elementary School	<input type="text"/>	Grade	<input type="text"/>
Parent/Guardian	<input type="text"/>	Phone	<input type="text"/>
Second Contact	<input type="text"/>		
email	<input type="text"/>		

Preferred* Date to Shadow LVHS

* LVHS will contact you to notify you of the scheduled date for the Student Shadow visit. Please note that we cannot accommodate student arrivals that LVHS did not confirm.

Does you have any health concerns for your student? No
If marked "yes", please explain:

By signing this form, I give consent for my child/ward to attend Lake View High School to participate in a Student Shadow Day and authorize Lake View High School staff members to act for me in the event of an emergency, accident, or illness involving my child/ward. I understand that I am responsible for my child/ward arriving at Lake View at 9:00 AM as well as providing transportation for my child to be picked up at 1:15 PM.

Parent/Guardian Printed Name	<input type="text"/>	Date	<input type="text"/>
Parent/Guardian Signature	<input type="text"/>		<input type="text"/>

This is a parent permission slip. Your student must still register online for a Shadow Day. This process helps us pair your student with a LVHS Wildcat that can best address his/her questions.