

ST. JOHN PAUL II CATHOLIC HIGH SCHOOL

BOLDLY GOING FORWARD IN THE SPIRIT

Shadowing Form

grade stude	ent
at	School and has my permission to shadow at
St. John Paul II Catholic High	School on (Date)
Parent Name (print):	· · · · · · · · · · · · · · · · · · ·
Parent Signature:	
Home Address:	
-	
Home Phone:	Cell Phone (s):
Work Phone:	E-Mail:
☐ I would like a tour and to d	iscuss admission when my student shadows.
☐ I would like to schedule a to student shadows.	ime for a tour to discuss admission, separate from the date that my

- 1. Contact our Front Office to schedule your visit.
- 2. Please bring this form on the day of your visit.
- 3. Our students do wear uniforms, so proper dress is required. Please contact the office if you have specific questions.
- 4. Plan to check in at the Main Office by 7:45 AM, with your Parent to meet your student host/hostess.
- 5. Classes begin at 8:00 am. Promptness is important.
- 6. Students may stay and have lunch with their host/hostess and will be ready to leave at 12:45. Please make arrangements for transportation accordingly.
- 7. Lunch will be covered by SJPII.