

Shenango High School  
2550 Ellwood Rd  
New Castle, PA 16101

Ms. Julia Garda  
School Counselor  
(724) 658-5537 ext. 3520

## POST-SECONDARY VISITATION / JOB SHADOW FORM

Parental permission is granted for \_\_\_\_\_ to visit the Institution listed below under the following conditions:

- The parents or guardians will assume the responsibility for their child while he or she is away on the visitation and will absolve the Shenango Area School District of any liability incurred in connection with visitation.
- School release will NOT be granted for any student who is failing a subject
- The student will be responsible for making up any missed school work
- The final decision for granting released time will be made by an appropriate school official

Name of Institution/Company visiting: \_\_\_\_\_

Date and Time of Visitation: \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
School Official Signature

\_\_\_\_\_  
Title

\*Please Note: This form must be returned to the Guidance Office.

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Verifying Institution / Company Official:

\_\_\_\_\_ visited our Institution/Company on \_\_\_\_\_.  
(student) (Date and Time)

\_\_\_\_\_  
Name of Institution

\_\_\_\_\_  
Signature of Official

\_\_\_\_\_  
Title