

**Executive Internship**  
**w/ Mrs. Acquard and Mrs. Richards**

**PARENT/GUARDIAN PERMISSION FORM**

- I have reviewed and agree to all conditions of the Executive Internship Program and grant permission for my child to enroll in the Executive Internship course.
- My child has reliable transportation to and from the internship site
- My child has no scheduling conflicts with the internship placement. This includes, but is not limited to extracurricular activities - including sports practices and/or games, academic issues/conflicts - including tutoring, college visits, studying for exams

Student Name \_\_\_\_\_

Parent/guardian Name (print) \_\_\_\_\_

Parental signature \_\_\_\_\_