

Great Lakes Adventist Academy  
**CAMPUS LEAVE AUTHORIZATION**

Student's Name:	
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**1. Our (my) student has permission to leave campus on the following occasions as checked below:**

- Scheduled Home Leaves     
  Open Weekends     
  School-Sponsored Trips  
 (Promotional, Field Trips, etc.)

**2. Our (my) student may leave by the following methods of transportation as checked below:**

- Automobile     
  Commercial Airlines     
  Public Bus  
 School Bus     
  Train     
  Other: \_\_\_\_\_

**3. Our (my) student may leave campus with the following people:**

NAME	RELATIONSHIP
<i>List any Exceptions:</i>	

**4. If plans are made to visit another student's home over a home leave, the dean needs to receive written permission from the parents of both homes prior to the home leave weekend. (Permission over the telephone is not acceptable.)**

**5. For the purpose of uniformity, possible disciplinary restrictions, possible legal liability and other student responsibilities, the school reserves the right to make the final decision regarding all off-campus privileges, and overrule parental or guardian authorization.**

**6. We (I) understand that we (I) absolve the school from liability for the off-campus trips authorized.**

(Father or Guardian Signature)	Date
(Mother or Guardian Signature)	Date