



Sarasota Military Academy
Media and Instructional Materials
Informed Parental Consent Form

Complete this form and return it to the school/teacher. It must be on file at the school before your son/daughter/ward will be permitted to participate in this activity.

**I, _____, DO grant permission for my student, please SIGN your own name, in ink, here (first and last)

_____ to participate in the following instructional activity. please PRINT your student's name here (first and last)

Planned Instructional Activity & Instructional Objectives:

Three horizontal lines for writing the planned instructional activity and objectives.

Some of the instructional materials used in this activity may contain mature themes and/or language. If you have any questions about the specific materials to be used, please do not hesitate to contact me at school (926 – 1700) between 1:40 and 2:00. You may also email me at: rachel_wasserman@sarasota.k12.fl.us

If you refuse permission for your student to participate in this instructional activity, please sign the form in the space below. In that case, an alternate assignment with the same instructional objectives will be provided for your student.

I do not grant permission for my student to participate in this activity.

_____ sign your first and last name here

_____ please PRINT your student's first and last name here

Thank you!
Captain Wasserman
US History