



HALL COUNTY TEACHER APPRENTICE PROGRAM

PARENT/GUARDIAN RELEASE OF LIABILITY

I understand that my son/daughter is being released from Flowery Branch High School on thirteen different occasions, spread out over the semester during their respective *Teaching as A Profession* pathway class to go and observe/learn/teach at Spout Springs, Martir, or Friendship Elementary School as part of their Teacher Apprenticeship experience. My son/daughter will leave campus at the beginning of their class period and will return by the end of the class period.

I hereby give my son/daughter, _____, my permission to participate in the program and understand that he/she must adhere to all policies established by the YAP program, the worksite, and Hall County Schools. *Transportation will be provided by Hall County Schools and all students must ride to and from the elementary school on the bus provided.* Hall County Schools, the YAP program/coordinator, and the classroom teacher are released from any liabilities incurred while the student is off campus, on the worksite and traveling to and from the worksite. I also understand that my son/daughter must take out SPAGE insurance to cover them during this experience.

Parent Signature _____ Date _____

Student Signature _____ Date _____