UCSD San Diego Supercomputer Center Transportation Consent Form

Today’s Date: Workshop Name:

Student Name:

Please fill out the following if your student is carpooling:

□ I will drive my student and another student.

□ My student will carpool with a friend.

Carpool will take place     ____/____/____      (Month)/(Date)/Year)

Name of adult(s) who have permission to pick up my student

1. Name             Phone Number
2. 
3. 

Name of student(s) who will be carpooling with my student

1. 
2. 
3. 
4. 

Please fill out the following if your student has permission to sign themselves out

□ My student has permission to walk to a designated location.

□ My student will ride the bus.

□ My student will be taking an alternative form of transportation (please specify) ____________________________.

My student may sign themselves out on     ____/____/____      (Month)/(Date)/Year)

PLEASE NOTE: Students MUST be 16-years of age or older to sign themselves out.

Print Parent/Guardian Name

Parent/Guardian Signature                     Date:

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