



550 East Tennessee Street
Tallahassee, Florida 32308

Phone 850-617-5700
Fax 850-922-5311

Application for Off-Campus Lunch Privileges

Off campus lunch privilege is reserved for eleventh and twelfth grade students in accordance with Leon County School policy 3.03(8)©. Only juniors and seniors who have earned a 2.0 unweighted grade point average (GPA) during the PRECEDING SEMESTER and who do not have any financial obligations to the school are eligible for off campus lunch privileges. The parent's signature must be notarized if the parent will not be present at the time the application is submitted.

Students must be present for pass to be processed.

A Parent or Guardian Must Complete This Section

Student Grade _____

Address: _____ Phone: _____(W) _____(Cell)

* This is to certify that _____ has my permission to
PRINT STUDENT'S FIRST & LAST NAME

leave campus during her / his lunch period. I have read this document and agree with the stated consequences for the violations listed on page 2 of this application.

Notarized Signature - A notary is someone legally empowered by the state of Florida to witness signatures and certify a document's validity.

PARENT'S OR GUARDIAN'S NAME

PARENT'S OR GUARDIAN'S SIGNATURE

Sworn to and subscribed before me this ___ day of _____, 20___

Signature of Notary Public _____

SCHOOL USE ONLY

Student Number: _____ Grade: ___ 2nd Sem. Unwt. GPA _____
Grade: ___ 1st Sem. Unwt. GPA _____
Obligations: Yes / No (Circle one)

Principal/Designee's Signature

Date

Violations and Consequences may include but are not limited to:

VIOLATIONS

- 1. Leaving campus during lunch without an approved off-campus application and / or an off-campus pass**
- 2. Reckless driving, speeding, not wearing seat belts, or other driving violations**
- 3. Transporting unauthorized students off-campus during lunch**
- 4. Excessive tardiness (over 3) to class after lunch**
- 5. Failing to return to class after lunch without signing out in the attendance office prior to departing for lunch**

CONSEQUENCES

- After School Work Detail**
- Saturday School**
- In School Suspension**
- Out of School Suspension**
- Suspension of Parking Privileges**
- Revocation of Parking Privileges**

I have read this document and I agree with all of its terms.

PRINT STUDENT'S NAME

STUDENT'S SIGNATURE