

ASB Blood Drive Permission Slip

Dear Teachers,

As you may know, ASB is holding its first blood drive of the year on Thursday, November 21, 2013. You ensure that this drive runs smoothly and successfully we need to have a few students at the drive between the 9:00-1:00.

_____ would like to participate in the blood drive event. Please sign below and check the appropriate line. **NOTE: The student is fully aware that they are required to complete any work missed.**

Second Period Class: _____

Teacher Name: _____

Teacher Signature: _____ Approve ____ Disapprove ____

Fourth Period Class: _____

Teacher Name: _____

Teacher Signature: _____ Approve ____ Disapprove ____

Sixth Period Class: _____

Teacher Name: _____

Teacher Signature: _____ Approve ____ Disapprove ____

Thank you very much for your support and permission. You are greatly appreciated.

Sincerely,

Jenna Jewell