



**2010 Make-up Visitation**

High School \_\_\_\_\_

Student ID # \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail \_\_\_\_\_ Teacher/Class Period \_\_\_\_\_

**Please choose only one location per date.**

<p><input type="checkbox"/> <b>Eastland Career Center</b></p> <p><b>Choose date:</b></p> <p><input type="checkbox"/> January 28, 2010  <input type="checkbox"/> February 18, 2010  <input type="checkbox"/> March 11, 2010  <input type="checkbox"/> April 8, 2010  <input type="checkbox"/> April 29, 2010</p> <p><b>Choose 2 Programs:</b></p> <p><input type="checkbox"/> Ag/Industrial Diesel Mechanics  <input type="checkbox"/> Auto Technology  <input type="checkbox"/> Collision Repair Technology  <input type="checkbox"/> Computer-Aided Design Drafting  <input type="checkbox"/> Cosmetology  <input type="checkbox"/> Criminal Justice  <input type="checkbox"/> Culinary Arts  <input type="checkbox"/> Dental Assisting  <input type="checkbox"/> Electrical Technology  <input type="checkbox"/> Electronics  <input type="checkbox"/> Financial Services  <input type="checkbox"/> Graphic Design  <input type="checkbox"/> Horticulture—Landscaping  <input type="checkbox"/> Horticulture—Retail  <input type="checkbox"/> Interactive Media  <input type="checkbox"/> Legal/Medical Office Technologies  <input type="checkbox"/> Programming &amp; Software Development  <input type="checkbox"/> Restaurant Services  <input type="checkbox"/> Welding</p>	<p><input type="checkbox"/> <b>Fairfield Career Center</b></p> <p><b>Choose date:</b></p> <p><input type="checkbox"/> January 28, 2010  <input type="checkbox"/> February 18, 2010  <input type="checkbox"/> March 11, 2010  <input type="checkbox"/> April 8, 2010  <input type="checkbox"/> April 29, 2010</p> <p><b>Choose 2 Programs:</b></p> <p><input type="checkbox"/> Auto Technology  <input type="checkbox"/> Building Trades  <input type="checkbox"/> Carpentry  <input type="checkbox"/> Computer Support Technology  <input type="checkbox"/> Cosmetology  <input type="checkbox"/> Health &amp; Recreation Services  <input type="checkbox"/> Health Technologies  <input type="checkbox"/> Heating, Ventilation, Air Conditioning, &amp; Refrigeration</p>	<p><input type="checkbox"/> <b>Satellite Locations</b></p> <p><b>Choose date:</b></p> <p><input type="checkbox"/> January 28, 2010  <input type="checkbox"/> February 18, 2010  <input type="checkbox"/> March 11, 2010  <input type="checkbox"/> April 8, 2010  <input type="checkbox"/> April 29, 2010</p> <p><b>Choose 1 Program:</b></p> <p><input type="checkbox"/> <b>Architecture/Construction Management</b>  <i>Gahanna Lincoln High School</i></p> <p><input type="checkbox"/> <b>Cisco Networking Academy</b>  <i>New Albany High School</i></p> <p><input type="checkbox"/> <b>Environmental Science</b>  <i>New Albany High School</i></p> <p><input type="checkbox"/> <b>International Business</b>  <i>Gahanna Lincoln High School</i></p> <p><input type="checkbox"/> <b>Marketing &amp; Logistics Management</b>  <i>Groveport Madison High School</i></p> <p><input type="checkbox"/> <b>Multimedia</b>  <i>Pickerington High School North</i></p> <p><input type="checkbox"/> <b>Performing Arts</b>  <i>Reynoldsburg High School</i></p> <p><b>Transportation to satellite programs is not provided.</b></p>
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See back side for permission slip.

Completed form must be turned in to your high school guidance office at least 3 days before field trip.

# attention: parents/guardians

Your student recently attended a presentation regarding opportunities available through Eastland-Fairfield Career & Technical Schools and your high school. If you're reading this, your student is interested in a field trip to explore the options. We thought you might like to know a little about us before you sign.

Eastland-Fairfield Career & Technical Schools is a great place to learn, build experience, and explore a career before entering college, technical school, or the workforce. We offer programs in the traditional trades and licensed professions, college-level programs, and programs for students with special educational needs.

## Connecting academics to real-world success

Eastland-Fairfield programs allow students to immerse themselves in a career field or profession, spending a half-day learning hands-on and gaining real-world experience. Our classrooms and labs are equipped with the latest technology. Career Technical Education focuses on the standards required in the workplace. Combine that with top-notch academics, and you have what employers call added value. Not only do Eastland-Fairfield programs prepare students for further study, but many also allow students to earn college credit or enter college in advanced standing. Students can earn up to 43 credits in selected programs, graduating with a college transcript that can be taken nearly anywhere!



## Emergency Medical and Permission Form

In the event that reasonable attempts to contact me at the listed phone numbers have been unsuccessful, I hereby give my consent for (1) the administration of any treatment deemed necessary by my preferred physician/preferred dentist, or in the event the designated preferred practitioner is not available, by another licensed physician or dentist; and (2) the transfer of my child to my preferred hospital, or any hospital reasonably accessible. This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity for such surgery, are obtained prior to the performance of such surgery.

### Emergency Contact Information

Emergency Contact Name \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

Daytime Phone Number \_\_\_\_\_ Alternate Phone Number \_\_\_\_\_

Preferred Physician \_\_\_\_\_ Phone Number \_\_\_\_\_

Preferred Dentist \_\_\_\_\_ Phone Number \_\_\_\_\_

Preferred Hospital \_\_\_\_\_

Check here if you **do not** give consent for emergency medical treatment of your child. In the event of illness or injury requiring emergency treatment, school authorities should take no action or:

*By signing below, you are giving your child permission to attend the program visitations.*

**Sign below and return this form to the guidance counselor.**

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Name (Please print)

\_\_\_\_\_  
Daytime Phone Number