

PERMISSION SLIP TO ATTEND YOGA ON FRIDAYS

Student's name: _____

Grade: _____

Carter teachers,

Sign your name next to 'Teacher's Signature'. Write a checkmark if the student's citizenship grade is either an 'O' or an 'S', and another checkmark if that student had no missing assignments throughout the week.

Thank you ☺

Ms. Augustin

Subject/ Teacher's Name	Citizenship Grade:	No Missing Assignments
1 ST Hour: Subject: Teacher's Signature:		
2 ND Hour: Subject: Teacher's Signature:		
3 RD Hour: Subject: Teacher's Signature:		
4 TH Hour: Subject: Teacher's Signature:		
5 TH Hour: Subject: Teacher's Signature:		
6 TH Hour: Subject: Teacher's Signature:		