Date:				
I, Your Child to Work Day on T	hursday	, April 25,	will be taking my child(ren) f 2024.	or Take
PLEASE PRINT (One form per fa	mily)			
Child's name	am / pm	/ all day	Grade/Teacher	
Child's name	am / pm	/ all day	Grade/Teacher	
Child's name	am / pm	/ all day	Grade/Teacher	
Child's name	am / pm	/ all day	Grade/Teacher	
Parent/Guardian Signature:				
Parent/Guardian Name: (Please print)				

Please feel free to contact the school office at 303-431-3694 if you have any questions. Students will be responsible for any work missed. It is our recommendation to get work ahead of time if possible. *This form needs to be returned to the front office by Wednesday, April 24, 2024 in order to be excused.*

Thank you,

WWA Administration