

WHS PSAT

RETURN THIS PERMISSION SLIP BY WEDNESDAY, September 7.

My child has permission to take the PSAT on Tuesday, October 25.

Child's Name _____

Parent/Guardian Name _____

Parent/Guardian Signature _____

*If your child drives to school, they will report to Waynesville Community Church at 7:45 on the day of the test. They will drive to the high school when they are finished taking the test.

*If your child rides the bus to school, they will report to the High School gym when they get off of the bus on the day of the test. They will be bussed back to the high school when they are finished taking the test.

*Students will eat lunch at Waynesville Community Church when they are finished taking the test.

*Include a check with this permission slip. The cost of the test is \$18. Checks should be made payable to Waynesville High School. Include your child's name on the memo line.

*Return this slip and your check to Sharon Vogel.

Questions?

Contact Karen Boggs kboggs@wayne-local.com