



SALISBURY COMPOSITE HIGH SCHOOL

CONSENT FOR PLACEMENT IN KNOWLEDGE AND EMPLOYABILITY (K&E) COURSE(S)

As the parent or legal guardian of _____, I hereby give
(*Name of Student*)

consent for this student to be placed within course(s) of the Knowledge and Employability Program at Salisbury Composite High School.

The nature of the program along with the options and opportunities Knowledge and Employability courses provide have been explained to me.

I understand that consent is voluntary and may be withdrawn in writing by me at any time.

Questions may be directed to the counsellor or special education facilitator at the referring junior high or to Karen Wiltse, counsellor for students with complex needs, at Salisbury Composite High School.

The signature below indicates I understand the information presented and that I freely consent to have my child registered in this program.

Date:	Date:
<i>Parent/Guardian Signature</i>	<i>Principal/Designate Signature</i>
<i>Signature of Student (Required if Independent Student)</i>	