CTE/WEMOCO

Monroe 2-Orleans BOCES

Work Experience Transportation Consent Form

Name of Student Date \_\_\_\_\_\_\_\_\_\_

Home District Teacher \_\_\_\_\_

Class \_\_\_\_\_\_\_\_\_\_\_ AM PM

I/we request permission for my son/daughter to walk/drive to work experience site.

I/we give permission for my son/daughter to walk/drive to a work experience. I/we understand that Monroe 2-Orleans BOCES and CTE/WEMOCO are **NOT** responsible and have no liability whatsoever for any motor vehicle accidents, injury, and/or personal property damage or loss resulting from any use whatsoever of the motor vehicles on BOCES/Work Experience owned or leased grounds. Students assume responsibility for all passengers in their vehicle authorized or unauthorized. Being allowed to transport self to work experience is a **PRIVILEGE** and is conditional upon proper and safe practices.

I/we hereby give permission for my child to drive to work experience site.

Signature of Student Date

Signature of Parent Date

**Please return this form to the Career and Counseling Office at WEMOCO or** [bgage@monroe2boces.org](mailto:bgage@monroe2boces.org)