PROSPECTIVE 6TH-11TH GRADE STUDENT

SHADOW DAYS

GRAND TRAVERSE AREA CATHOLIC SCHOOLS

Shadow Days are a great opportunity to visit our Catholic schools! Each visiting student is paired with a friend or peer with similar interests who serves as our guest's personal guide throughout the visit.

Pre-registration is required. This is for students in grades 6-11; there is a different form for students in grades 1-5. Please fill out the permission form and email it to admissions@gtacs.org. Questions? Call Admissions (231) 995-8477.

ST. ELIZABETH ANN SETON MIDDLE SCHOOL
601 THREE-MILE ROAD, TRAVERSE CITY, MI 49696

ST. FRANCIS HIGH SCHOOL
123 E. 11TH STREET, TRAVERSE CITY, MI 49684

After our daughter shadowed, she felt more confident about making the transfer, and we really feel it helped ease her transition to the new school.

– Shadow Day participant

REQUESTED SHADOW DATE(S)

First choice _____

Second choice _____

Third choice _____

❑ **Check in upon arrival at 7:40 a.m.**

❑ **Pickup time is 2:40 p.m.**

❑ *Guests are asked to wear modest clothing that is as similar as possible to our school uniform (e.g., navy pants or khaki, white, yellow or navy polo shirt). No jeans/leggings.*

❑ *PARENTS: Your signature indicates your permission for your student to attend Shadow Day at Grand Traverse Area Catholic Schools.*

* *We will do our best to honor Shadow partner requests; however, in some situations we will need to assign a different partner. The school will communicate with the family in advance.*

SHADOW DAY GRADES 6-11

STUDENT INFORMATION & PERMISSION FORM

STUDENT PARTICIPANT NAME
CURRENT SCHOOL & GRADE LEVEL
STUDENT'S DATE OF BIRTH
PARENT NAME
STUDENT'S ADDRESS
CITY/STATE/ZIP
HOME PHONE CELL PHONE
EMAIL
AREAS OF SPECIAL INTEREST OR CONCERN
GTACS STUDENT PARTNER REQUEST (OPTIONAL)*
EMERGENCY CONTACT NUMBER(S)
MEDICAL CONDITIONS AND/OR ALLERGIES
PARENT/GUARDIAN SIGNATURE