

RE: Career Day

Students and Families,

On **November 23, 2021** Copley High School 10th Grade students will participate in Copley's Career Day in the morning at CHS. Students will be able to listen to speakers from many different career fields. After lunch students will be taking a field trip to Barberton High School to explore additional careers and to learn about Four Cities Compact Programs.

Please Note:

Due to busing and mask mandates at Barberton HS, students will be **REQUIRED** to wear a mask while on the bus and while at Barberton High School.

What can students learn from the Career Day Field Trip?

- Learn what careers interest students
- Learn about many different career pathways (college, military, and employment)
- Learn how to get ahead in college by gaining major specific content before students even enroll in college
- Learn about 4 Cities Compact Programs
- Learn how to become certified in a profession and start working right after graduation (and many times even before you graduate)
- Learn how students can explore a career in high school before deciding on a major in college
- Learn how to obtain all your elective credits in classes students really enjoy

ALL students must complete the attached form and return to their Learning Lab teacher before **NOVEMBER 1, 2021.**

If you have any questions please contact the CHS Guidance office at 330-664-4827 or email your school counselor.

Copley High School Field Trip Permission Slip

STUDENT NAME _____ Date of Trip: 11-23-2021

Destination of Trip: Barberton High School

Academic Purpose: Career Day

Teacher in Charge: Guidance

Departure Time: 11:30 Return Time: 1:30

Upon receipt of the approved permission slip, the teacher in charge will inform your student's other teachers of the field trip a week prior to the field trip. A student may be excluded from the field trip if the student's absence from another class jeopardizes their grade. It is the responsibility of the student to receive work missed from other classes the day of a field trip.

Parent Consent: I give my student permission to attend the field trip listed above.

(Parent/Guardian Signature) (Phone) (Date)

EMERGENCY MEDICAL AUTHORIZATION

Part 1: Granting Consent (This must be filled out WITH parent signature)

I hereby grant consent for the following medical care providers and local hospital to be called:

Physician _____ Phone _____

Dentist _____ Phone _____

Medical Specialist _____ Phone _____

Local Hospital _____ Emergency Room Phone _____

In the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent for (1) any treatment deemed necessary to above named doctors, or in the event the designated preferred practitioner is not available, by another licensed physician or dentist; and (2) the transfer of the child to any hospital reasonably accessible.

This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity for such surgery, are obtained prior to the performance of such surgery. Facts concerning the child's medical history including allergies, medications being taken, and any physical impairment to which a physician should be alerted:

Signature of Parent/Guardian Phone _____

Part II: Refusal to Consent

I do NOT give my consent for emergency medical treatment of my child. In the event of illness or injury regarding emergency treatment, I wish the school authorities to take the following action:

Signature of Parent/Guardian Phone _____