



Urban Alliance Parent/Guardian Approval and Release

Parental/Guardian support will be an important part of the Urban Alliance program. ***Your signature is required for your student to apply for and participate in the Obama Youth Jobs Corps junior-year program.***

If selected for the Obama Youth Jobs Corps junior-year program, your student will attend professional development workshops after school two days/week. Dates and times are to be determined.

I _____ (print name), as legal parent/guardian of _____ (print student's name) hereby authorize him/her to participate in the aforementioned activities. I agree to allow Urban Alliance to obtain his/her academic and or attendance records. I certify that the information filled out on the previous pages is correct to the best of my knowledge.

I understand that my student's internship opportunity may be terminated at any time if s/he is unable to abide by Urban Alliance policies or demonstrates inadequate performance at the job site. I understand that Urban Alliance promotes self-sufficiency; therefore, primary communication must be held between my student and his/her Program Manager.

Please select one: YES, I agree NO, I do not agree

In addition, I authorize Urban Alliance or its designees to take and use photographs, audio/visual recordings, quotes, or stories of my student or their experience with Urban Alliance publicly in any form (including, but not limited to, marketing, communications/public relations, and media (traditional and social)) in support of our program.

Please select one: YES, I agree NO, I do not agree

Parent/Guardian's Signature _____ Date _____

Daytime phone # (____) _____

Evening phone # (____) _____

Comments or Concerns: