



Sunrise Middle School Montessori Magnet
2024 6th grade Student Shadowing Application B

Student Name: _____ Current Grade: _____

Current School: _____

Current School Administrator's or Teacher's Signature: _____

Parent Name: _____ Phone: _____

Address: _____ City: _____

Email address: _____

Please indicate ***your first and second choice*** from the following dates:

_____ Tuesday, February 27th, 2024

_____ Thursday March 14th, 2024

_____ Wednesday, March 6th, 2024

_____ Monday, March 18th, 2024

- Please return the shadowing form at least five (5) business days before the shadowing date to secure a space, as some days fill up quickly, and we might not be able to accommodate your request.
- Shadowing forms must be completed and returned to denise.calder@browardschools.com or sherry.yaqub@browardschools.com.
 - Please note that you are responsible for transporting your child to and from Sunrise Middle School.
 - Please drop off your child in Guidance between the hours of 9:15 AM and 9:25 AM.
 - Children are to be picked up promptly at 1:45 PM in the Guidance Office.
 - Your student can bring a bagged lunch or eat the school lunch offered on that day.
- If your child knows a current 6th grade student in the Montessori Magnet that they would like to shadow, please indicate the student's name: _____

My signature below indicates that I have discussed with my child that he/she is expected to adhere to Broward County Schools' Code of Student Conduct while participating in this activity.

Parent Signature

Date

Sunrise Middle School Montessori Office Personnel:

Sunrise Student Assigned: _____ Team: _____