Sunnyvale High School

Homecoming 2019

Date Approval Form

	SHS Student	
Prospective Date's Name		
School Attending		
Grade Level		
If High School Graduate: School Graduated From		
Year		
To the Prospective Date's բ	present/past School Administrator:	
	(Prospective Date) is requesting a or Sunnyvale High School. Please A	• •
	above in good standing with discip YES NO	line & attendance a
Signat	ture of Administrator	
Contac	ct Number/Extension	
Approved by	SHS Administration	