

Midland Park High School  
Guidance Department  
Shadowing Program

I have requested and agreed to allow my son/daughter,  
\_\_\_\_\_, to shadow a student for the day at Midland Park  
High School. I understand that he/she will be paired with a \_\_\_\_\_ **grade student**  
whose course load may reflect their future \_\_\_\_\_ grade schedule. Students are to  
report to the **Guidance Office** at the beginning and at the end of the day for  
security purposes. Our school day begins at 8:05 am and ends at 2:50 pm.

Please return the completed application and a copy of your current school schedule  
to: Marie Pantina, MPHS Guidance Department

**Once your request has been processed by Midland Park  
High School, you will receive a call to set a date.**

**Parent/Guardian:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_

**Emergency Contact #:** \_\_\_\_\_

**\*Important Medical Issues:** \_\_\_\_\_

**Current School:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*Any medical issues that may require the administration of medication during  
the school day may require a release form from the health office.**

**Midland Park Student's name** \_\_\_\_\_

**Phone # 201-444-7400**

**FAX: 201-444-0352**