

## Parent/Guardian Permission Form

**Applicant Name:** \_\_\_\_\_

I, \_\_\_\_\_, give my permission for my child,  
(parent/guardian name)

\_\_\_\_\_, to participate in the University  
(student first and last name)

**Preview Program at the University of Pittsburgh at Greensburg.**

**Signature:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_