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Gorham Middle & High School  
120 Main Street, Gorham, NH 03581

### STUDENT PRIVILEGE REQUEST APPLICATION FORM

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date: \_\_\_\_\_

Please respond to the following self-evaluation statements:

**TRUE** **FALSE**

**During the last marking period:**

- \_\_\_\_\_ \_\_\_\_\_ *I did **not** receive a detention for receiving three late slips.*
- \_\_\_\_\_ \_\_\_\_\_ *I did **not** receive a failing grade on my report card.*
- \_\_\_\_\_ \_\_\_\_\_ *I was **not** truant and/or suspended from school.*
- \_\_\_\_\_ \_\_\_\_\_ *I was **not** assigned a Saturday detention.*
- \_\_\_\_\_ \_\_\_\_\_ *I was **not** suspended by administration from a class for a disciplinary reason.*

If I indicated "TRUE" to **ALL** of the above statements, then I will have this request form signed and return it to the main office.

I understand that this is a privilege, not a right, and it may be revoked at any time if I fail to follow school rules or fall below passing grades on future progress reports and report cards. I also understand that all Student Privilege Request Application forms will be reviewed by staff and administration, and only those students in good standing will receive privileges.

I understand that I must sign out before leaving the building and sign in when I return. Failure to do so could result in suspension of my privilege. I will not sign for others nor let others sign for me.

I understand the rules stated above and I attest that I answered the above statements honestly.

\_\_\_\_\_  
Student's Signature

If my son/daughter should receive school privileges, I give my son/daughter permission to leave the school grounds during lunch and accept full responsibility for his/her actions.

\_\_\_\_\_  
Parent/Guardian Signature