



Dear Parents and Guardians:

On the date of Dec 6-9, 2021 your student will get an opportunity to visit and explore more about career and high school options in the Butler Tech Career Lab housed at the Butler Tech Fairfield Township Campus. While at the Career Lab students will complete two interactive hands-on modules that they will sign up for based off of an interest assessment that was completed.

The visit to the Butler Tech Career Lab will depart from our school at 9:00 am and students will return to school by 1:30 pm. Students are advised to follow the school's dress code and wear closed toed shoes. All students need to bring a packed lunch to eat in School of the Arts Cafeteria at Butler Tech. The Career Lab visit will also allow students to:

- Learn more about the following in two program/occupational areas: -skills, abilities, and knowledge required -career options by varying degree level -average salary -job outlook -education required -Ohio Department of Education Career Pathway -Ohio Department of Education suggested secondary and post-secondary pathway
- View a virtual tour of 2 Butler Tech's buildings---Bioscience Center and Natural Science Center
- Take a walking tour of the Fairfield Township campus---D. Russel Lee & School of the Arts buildings

Please complete and promptly return the attached field trip permission form to allow your student permission to visit. All field trip forms must be returned by the date of November 17, 2021. More information about the Career Lab can be found at: www.butlertech.org/careerlab.

Parent/Guardian Signature

Date

By signing, I am giving permission for my student to attend this field trip.

Phone number

Emergency Medical Form for 12/ 2021

Last name	First Name
Home address	City State Zip
Birthdate	
EMERGENCY CONTACT INFORMATION:	
Name	Home Phone
Address	Work Phone
City State Zip	
Relationship to student	
Please list any current medical conditions that your student is being treated for.	

I am of the opinion that _____, can participate in the Edgewood field trip to Butler Tech. I further declare that my student has no physical, mental or communicable conditions that will interfere with participation in this trip. I consider my student's health to be in Good condition.

If a medical emergency arises while my student is participating in the Edgewood trip, permission is given for physicians to perform needed treatment.

Signature of Parent/Guardian _____ Date _____

Name _____

Social Studies Teacher (Please Circle)

Hawkins McDonnell Ms. Mann

For the field trip to Butler Tech
students are required to bring a sack
lunch.

_____ I will be packing my own lunch.

_____ I am requesting a sack lunch
from the cafeteria. (Please Circle)

PB&J Turkey Ham

White Milk or Chocolate Milk

Student Lunch Code _____