

FRANKLIN ROAD ACADEMY

PERMISSION FOR PRESCHOOL VISITATION



Name of Student: _____

School/Program currently attending: _____

School/Program Address: _____

City, State, Zip: _____

Phone Number: _____

Director or Principal: _____

Days attending school/program: **M** **T** **W** **Th** **F**

This letter confirms my permission for the staff of Franklin Road Academy to visit my child's preschool during the months of January and February of 2012.

I understand that Franklin Road Academy will notify my child's preschool administrators concerning the visit. I realize that this will be a confidential visit in which the children will be unaware of its purpose. All information will be held in absolute confidence and students, parents, and guardians will not have access to such information.

Parent/Guardian Signature: _____

Date: _____

When you have completed the form, please mail it in an **official school envelope** directly to:
Franklin Road Academy Admission Office, 4700 Franklin Road, Nashville, TN 37220.