

**St. Dominic School  
Shadow Day Request Form**

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Requested Shadow Date

\_\_\_\_\_  
Due Date for Request Form

**Must be in the office three school day prior to the requested shadow date.**

\_\_\_\_\_  
Name of Student

\_\_\_\_\_  
Homeroom

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Name of High School to be Shadowed

\_\_\_\_\_  
Signature of Eighth Grade Teacher—Mrs. Glassmeyer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Eighth Grade Teacher—Mrs. Daubenmerkl

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Eighth Grade Teacher—Mrs. Cox

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Eighth Grade Teacher—Mr. Burns

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Eighth Grade Teacher—Mrs. White

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of St. Dominic Attendance Secretary—Mrs. Haley

\_\_\_\_\_  
Date

\_\_\_\_\_  
High School Principal/Designee Signature

\_\_\_\_\_  
Date

*Verifies that the student was present at the high school on the specified Shadow Day*

**Return this form to the St. Dominic attendance secretary Mrs. Haley  
by 8:10 a.m. the next school day after shadowing.**