

# Saint Hilary School

Where faith, family, and academics thrive!

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## SHADOW DAY REQUEST

I, \_\_\_\_\_, request to attend  
(name of student)  
a Shadow Day at \_\_\_\_\_ High School  
on \_\_\_\_\_.  
(day and date)

I understand that I am responsible for completing all missed assignments for that day.

I understand that I may attend two Shadow Days in 7<sup>th</sup> grade and two in 8<sup>th</sup> grade without being charged with an absence.

This request is being submitted at least one week in advance of the date I am requesting.

Student Signature \_\_\_\_\_

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

Date \_\_\_\_\_

*Please refer to the Parent and Student Handbook for policies and guidelines regarding Shadow Days.*

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This form should be submitted to the Principal for approval and signature and then forwarded to the School Office for attendance purposes.

\_\_\_\_\_  
Principal Signature

\_\_\_\_\_  
Date