NASA Glenn Research Center - Office of STEM Engagement
High School Shadowing
Principal/Guidance Counselor Acknowledgment

_____
Name (First and Last) of student applying for this NASA opportunity

Session for which student is applying:

❑ – 9:00 am - 2:00 pm Eastern

I hereby acknowledge that the student named above is in good standing. I understand that the student may be absent from school to attend this shadowing opportunity. This student is currently enrolled and has no academic or student conduct issues that should prevent them from participation.

_____
Print High School Guidance Counselor or Principal Name

_____
High School Guidance Counselor or Principal Signature

_____
Name of High School

_____
Date

Please print, sign, and return