GP-3

Student Information:

Student _____ Faculty Advisor _____

Project Topic/Title _____

Mentor Information and Confirmation:

Mentor _____ Mentor Job Title _____

Mentor Employer _____

Phone Number (Work)_____(Home) _____

Address _____

Years of Experience in Project Area _____

I have been personally enlisted to serve as a Graduation Project mentor by the student and parent listed on this sheet. I agree to oversee the above student's progress during this Graduation Project; and, I will take all due care and precau- tion to prevent any harm from occurring to this student while under my supervision. I verify that I am 25 years or older and not an immediate family member to this student.

_____ _____

Signature of Mentor Date

Parent Confirmation:

As the parent or legal guardian of _____, I am aware that my child is working on a Graduation Project as required by the Wilkes County Schools for high school graduation. As part of the Graduation Project, my child will complete a portion of the project/product under the direction of a mentor knowledgeable in the project area. I agree to allow the enlisted mentor named above to supervise and direct my child's progress during the required hours of work on the project. I understand this mentor is in no way affiliated with the Department of Public Instruction or Wilkes County Schools, and the selection of both the project and mentor is entirely mine and my student's; therefore, I agree that I will not hold the school, school district, or its employees responsible for any financial obligations, damages, injuries, or accidents incurred while my child participates in the completion of his/her project.

_____ _____

Signature of Parent/Guardian Date Signature of Student Date

_____

Signature of Faculty Advisor Date