

## Islamic School of Irving



Today's Learners Tomorrow's Leaders

## **GUEST STUDENT PROGRAM**

Thank you for your participation in the **Guest Student Program** at the Islamic School of Irving. This program offers prospective students the opportunity to shadow a model student and observe a day in the life of an ISI Lightkeeper! Please review below. You will be asked to sign this form at the time of check-in.

## **AVAILABILITY TO OBSERVE**

**Elementary Students** [Defined as Current 1<sup>st</sup> – 5<sup>th</sup> Graders] May Observe for a **Half Day**: 7:45am – 12:30pm M-TH

**Secondary Students** [Defined as Current 6<sup>th</sup> – 12<sup>th</sup> Graders] May Observe for a **Full Day**: 7:45am – 3:15pm M-TH

## Important tips and instructions:

- Parents: Please allow 5 business days to receive approval for your request when considering the "Date to Observe."
- Guest Students must observe in their current grade level only.
- School is in session from 7:45am until 3:15pm. Please arrive by 8:00am at the latest.
- Guest Students must be accompanied by a Parent at the time of drop-off or pick-up.
- Guest Students should be dropped off and picked up with the Registrar in the Front/Admin Office and must sign-in and sign-out upon arrival and dismissal.
- All Guest Students are required to wear a guest badge which they can acquire from the Front/Admin Office. Guest Students may bring their current school's i.d. badge to wear if they have one.
- Please bring a lunch and/or snack to eat during designated times.
- All Guest Students are required to observe the ISI dress code policy and all other rules & regulations. Please refer to the Student Handbook at <a href="https://www.islamicschoolofirving.org">www.islamicschoolofirving.org</a> for more information.

\*PLEASE NOTE: The Guest Student Program is not to be used just to visit friends for the day. The program is designed for students interested in making Islamic School of Irving their possible school of choice. Thank you for your understanding and cooperation.

*Fill only one per student*		
Grade level to shadow:	Date to shadow:	
Parent/Guardian Name (s):		
Parent/Guardian Signature (s):		
Parent Guardian Phone Number (s):		<del></del> -
	****Office use only****	
Registrar's Office:		
Grade Teacher:		