



Parent Permission for Career Assessment

I, _____, agree to have my son/daughter, _____,
(Parent/Guardian) (Student Name)

from _____ school, participate in a Career Assessment given at the
(Name of School)

Warren County Career Center. This evaluation will be for a period of one to two days. I understand that

my child will be transported by the home school to and from the Career Center.

(date)

(Signature of Parent or Guardian)

Career Assessment is an individualized process designed to determine the unique abilities, aptitudes, interests, and needs of the student. Career assessment information is verified by using a variety of traditional methods and tools which include administration of surveys, inventories, ongoing interviews and/or tests.

It is the policy of the Warren County Career Center to offer educational activities, programs, services and employment without regard to race, color, national origin, gender, religion, handicap or age.

08/09