



**Office of Undergraduate Admissions**

100 W. Rosedale Avenue, West Chester, PA

19383 Ph: 610-436-3411 Fx: 610-436-2907

[www.wcupa.edu/admissions](http://www.wcupa.edu/admissions)

[ugadmiss@wcupa.edu](mailto:ugadmiss@wcupa.edu)

## Visiting Student Permission Form

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### Shadow Day 9:30am - 3:00pm

As a visitor on West Chester University's campus you are subject to the same rules and regulations as any other student attending the university. **Please note that if this form is not returned prior to or on the day of the program, you will not be able to participate.**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

WCU ID#: \_\_\_\_\_

Please have your parent/guardian sign below as consent to attend WCU's day program.

I, \_\_\_\_\_ give my consent for \_\_\_\_\_ to attend West Chester University's Shadow Day. We have reviewed the Student Code of Conduct.

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

Print Name: \_\_\_\_\_