



S.O.S!
For The Students⁺
Teaching Biblical Character

SOS! Parental Release Form

Student Name _____

Grade _____

School _____

Teacher _____

I, _____, (Parents name)
give permission for my child to participate in the SOS! For The Students Program
in his/her school. I hereby request my child (named on the form above) to be
excused from his/her public school class each week for the 2023-2024 school year
for instruction in Biblical character.

Parent's Name _____

Parent's Signature _____

Date _____