



STATE OF HAWAII  
DEPARTMENT OF EDUCATION  
WAIMEA HIGH SCHOOL

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WAIMEA, KAUAI, HAWAII 96796  
PHONE: (808) 338-6800 FAX: (808) 338-6807

**Senior Project**  
Parent/Guardian Consent/Liability Release Form

To the Parents/Guardians of \_\_\_\_\_, a senior at Waimea High School.

Your son/daughter is about to embark upon an exciting educational journey. The Senior Project will provide enormous benefits for your child both now and in the future. Successful completion of the Senior Project is a valuable tool in determining your child's mastery of the General Learner Outcomes and the Hawaii Content and Performance Standards.

Please take some time to discuss the project with your child, and initial each of the items below indicating that you have read, understood, and approve of each.

\_\_\_\_\_ I understand that my child must reach proficiency on all four requirements of the Senior Project in order to graduate.

- Research paper
- Comprehensive portfolio
- Final product involving a "learning stretch"
- Presentation before a panel of judges consisting of faculty, staff, and community members.

\_\_\_\_\_ I acknowledge that my child's responsibility is to find a community member to serve as his/her mentor for the product component of the Senior Project.

The mentor my child has chosen is \_\_\_\_\_

The project my child has chosen and received approval to do is \_\_\_\_\_

The mentoring site is \_\_\_\_\_

**I understand and accept:**

\_\_\_\_\_ I approve of my child's selected research paper topic.

\_\_\_\_\_ I approve of my child's selected project, and understand that some of the work will be completed outside of normal school hours.

\_\_\_\_\_ I approve of my child's community mentor.

\_\_\_\_\_ I acknowledge that the community mentor selected is at least 25 years old, and is not a relative or household member of my child nor is the community member an employee of Waimea High School.

\_\_\_\_\_ I understand that all transportation for work outside of the school day is the responsibility of the student or parent.

\_\_\_\_\_ I understand that all costs and risks associated with the project are the responsibility of the student or parent.

\_\_\_\_\_ I understand that the final project must be documented by photos or a video.

\_\_\_\_\_ I understand that each month beginning August 2011, my child is expected to meet with his/her school mentor between 1:45 – 2:45 p.m. as scheduled or by appointment.

\_\_\_\_\_ I understand that my child's Senior Project panel presentation will be assigned and scheduled in May 2012 for a 30 minute block between the hours of 2:30-7:30 p.m.

\_\_\_\_\_ I understand that integrity and honesty are just as important as all other components of the Senior Project. Any suspicion that my child has plagiarized or has been dishonest in any aspect of the Senior Project process may result in a referral to the school's Senior Project Advisory Team, administration, or other appropriate authority.

\_\_\_\_\_ I understand that integrity and honesty are just as important as all other components of the **Senior Project**. Any suspicion that my child plagiarized or has been dishonest in any aspect of the **Senior Project** process may result in a referral to the school's Senior Project Advisory Team, administration, or other appropriate authority.

\_\_\_\_\_ I understand that the Waimea High School, Kauai Complex Area, State of Hawaii, and their agents are not responsible for all potential risks resulting from the Senior Project. Accordingly, I release Waimea High School, the Kauai Complex Area, the Hawaii State Department of Education and their agents from all claims arising from any financial obligation incurred, and damage, injury, or accident suffered while my child participates in the Senior Project.

Parent/Guardian's Name (Print) \_\_\_\_\_

Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_