



# CICERO PREPARATORY ACADEMY

## A Great Hearts Academy

7205 North Pima Road | Scottsdale, AZ 85258 | Office: (480) 424-1790 | Fax: (480) 424-1791 | [www.ciceroprep.org](http://www.ciceroprep.org)

### STUDENT SHADOW REQUEST FORM

Please return this completed form via email to [cmalkin@ciceroprep.org](mailto:cmalkin@ciceroprep.org) OR fax to 480-434-6614

Student Name: \_\_\_\_\_ Male/Female \_\_\_\_\_

Entering Grade Level for 2017-2018: 9th

Interests/Activities (both academic and extra-curricular):  
\_\_\_\_\_

Student's Current School: \_\_\_\_\_

Does your student know a current Cicero Prep student? Please provide student's name:  
\_\_\_\_\_

Favorite subject in school: \_\_\_\_\_

Date Requested for Shadow Day: February 3 - 8:30am-1:45pm

For lunch, please check one below:

Lunch provided (from Sauce Italian restaurant)

My student has special dietary needs and will bring their own lunch

Emergency Contact Info (who to contact on the Shadow Day) \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**NOTE: Parents will join their students at 12:45pm for a Q & A with the Admin Team**

*Please note that Cicero Prep students are required to wear a uniform while on campus. Shadow students are asked to dress in clothing as similar as possible to the Cicero Prep uniform. For your shadow day, please wear a white or navy blue polo shirt with khaki pants or shorts. Shirts should be tucked in and a brown or black belt should be worn. Thank you, and we look forward to meeting your prospective Cicero Prep student.*

*By signing this document, I hereby waive and release Cicero Prep Academy, its employees, staff and students, from any and all liability for any injuries and/or illness incurred while my child or guardian is visiting the school campus. To the best of my knowledge, my child or guardian has no mental or physical limitations which could affect his/her successful participation in Cicero Prep Academy shadow program.*

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_