

Greetings Students & Parents,

Thank you for your interest in the **Gwinnett Technical College** tour presented by Newton County School System, College and Career Specialists in partnership.

When: November 4, 2025

Where: Gwinnett Technical College

5150 Sugarloaf Parkway

Lawrenceville, GA 30043

LUNCH: Stonecrest Mall Food Court

8150 Mall Pkwy

Stonecrest, GA 30038

Cost: \$20 for food (Students will need money to purchase lunch. Amount at personal discretion.)

Permission Slip Deadline: October 30, 2025

**** Capacity is 30 students. Once capacity is reached, permission slips will not be accepted**

A parent/guardian signed permission slip is required before a student can be reviewed and approved to attend this field trip. Each student will be expected to conduct themselves in a manner best representing the Newton County Schools district at all times.

To be considered for a college and career field trip spot, students must meet the following criteria:

- Submitted registration
- Signed and submitted permission form by DEADLINE
- No more than 5 full-day unexcused absences per semester
- Intention of enrolling or applying to the college or industry
- No failing grades in core academic classes.

Students should email a signed permission form to: Troutman.Jordan@newton.k12.ga.us by DEADLINE.

Any permission slips received after this date will not be considered.

In order to participate, each student must adhere to the following rules:

- I will respect public and private property; as well as the college trip attendees/chaperones
- I will adhere to the Newton County Schools code of conduct at all times.
- I will not use headphones, air pods or mobile devices while participating on the field trip. (Usage is allowed on the bus to and from the college, but not during the tour or info session.)

I, _____ agree to the above guidelines and expectations.

Print Student Name

Student Signature: _____

Parent/ Guardian Signature: _____

Parent/ Guardian Cell Phone: _____

Parent/ Guardian Email: _____

Date _____

Emergency Contact Information

Name: _____

Relationship to Student: _____

Email: _____

Telephone Number: _____

List Dietary Restrictions: _____