

**Please return this Administrator's Permission Slip to:**

Krista Winzer-Lee, Coordinator  
The Friendship Connection, Inc.  
P.O. Box 1444  
Hudson, OH 44236

**Or scan and email to: [FC.allforms@gmail.com](mailto:FC.allforms@gmail.com)**

The German student(s) visiting our community as partners in The Friendship Connection, Inc. visitation program will be granted permission to attend our school, shadow their American partner and observe in the classrooms during their three week stay, between the dates of **March 31st - April 23rd, 2025.**

**Administrator's signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**High School's Name** \_\_\_\_\_

**School's address** \_\_\_\_\_

**Your 2025 spring break dates:** \_\_\_\_\_