

Parent/Guardian Permission

Parent or Guardian's Name: Ferna S. Fernandez

Address: #526 Casbah Sta. Rita Guiguinto Bulacan

Parent/Guardian's Phone Number(s): 09972632018

As a parent/guardian of _____ Jomarie S. Fernandez _____, I am aware that my son/daughter must complete a Senior Capstone Project.

For the project, my son/daughter has chosen to:

develop a Medical Emergency Alert Button System. This project is intended to provide a quick and reliable way to report medical emergencies, reduce response time, and improve safety through timely communication within the school or community.

I have read the *Menu of Options for College & Career Ready Demonstrations* manual and have reviewed it with my child. He/she has my permission to complete a Capstone Project on the topic listed above.

Parent/Guardian Signature _____

Date _____

Parent/Guardian Permission

Parent or Guardian's Name: Annabie Cabigao

Address: #314 purok 5 Daisy St. Sumapang Bata Malolos Bulacan

Parent/Guardian's Phone Number(s): 09541805007

As a parent/guardian of Jean Gabrielle S. Cabigao, I am aware that my son/daughter must complete a Senior Capstone Project.

For the project, my son/daughter has chosen to:

develop a Medical Emergency Alert Button System. This project is intended to provide a quick and reliable way to report medical emergencies, reduce response time, and improve safety through timely communication within the school or community.

I have read the *Menu of Options for College & Career Ready Demonstrations* manual and have reviewed it with my child. He/she has my permission to complete a Capstone Project on the topic listed above.

Parent/Guardian Signature _____

Date _____

Parent/Guardian Permission

Parent or Guardian's Name: Michelle Mioten Carisma

Address: 149 Main Street Purok 3, Pritil, Guiguinto, Bulacan

Parent/Guardian's Phone Number(s): 09777963444

As a parent/guardian of Nativity Rose C. Cunanan, I am aware that my son/daughter must complete a Senior Capstone Project.

For the project, my son/daughter has chosen to:

develop a Medical Emergency Alert Button System. This project is intended to provide a quick and reliable way to report medical emergencies, reduce response time, and improve safety through timely communication within the school or community.

I have read the *Menu of Options for College & Career Ready Demonstrations* manual and have reviewed it with my child. He/she has my permission to complete a Capstone Project on the topic listed above.

Parent/Guardian Signature _____

Date _____

Parent/Guardian Permission

Parent or Guardian's Name: Renato Quintano Villarante

Address: 3770 St Ignatius Rocka Phase 7 Tabang Plaridel Bulacan

Parent/Guardian's Phone Number(s): 09666300406

As a parent/guardian of Khing Rennier P. Villarante, I am aware that my son/daughter must complete a Senior Capstone Project.

For the project, my son/daughter has chosen to:

develop a Medical Emergency Alert Button System. This project is intended to provide a quick and reliable way to report medical emergencies, reduce response time, and improve safety through timely communication within the school or community.

I have read the *Menu of Options for College & Career Ready Demonstrations* manual and have reviewed it with my child. He/she has my permission to complete a Capstone Project on the topic listed above.

Parent/Guardian Signature _____

Date _____

Parent/Guardian Permission

Parent or Guardian's Name: Emelyn Versoza Dalisay

Address: 628 Old Cagayan Valley Rd Taal Pulilan Bulacan

Parent/Guardian's Phone Number(s): 09757655249

As a parent/guardian of Kalvin Luis Dalisay, I am aware that my son/daughter must complete a Senior Capstone Project.

For the project, my son/daughter has chosen to:

develop a Medical Emergency Alert Button System. This project is intended to provide a quick and reliable way to report medical emergencies, reduce response time, and improve safety through timely communication within the school or community.

I have read the *Menu of Options for College & Career Ready Demonstrations* manual and have reviewed it with my child. He/she has my permission to complete a Capstone Project on the topic listed above.

Parent/Guardian Signature

Date
