# Data Science Foundations Course

# Phase 1

# Permission Slip

I give permission for Click or tap here to enter text. School/District to fully participate in Phase 1 of the Data Science Foundations course.

|  |  |  |
| --- | --- | --- |
| (Local Superintendent/Building Administrator) |  | Date |
|  |  |  |
|  |  |  |
| (Local School Board President or District Treasurer) |  | Date |
|  |  |  |
|  |  |  |
| (Professional Staff Bargaining Unit Leader) |  | Date |