I,	have v	oluntarily chose	n to tempo	orarily withdra	w my
son/ daughter Name	of Scholar	from the	UCD -Yo	ung Scholars P	rogram for the
period of time beginning	at Time		Date	and ending	
<u>approximately</u> at Tin		Date	<u> </u> .		

I understand that while my child is away from the Young Scholars Program that he/ she will not be affiliated with the UCD-YSP in any way nor will the University of California, the Division of Education, The Young Scholar's Program or any of its officers or employees be liable or responsible for his/ her actions.

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_

Emergency contact information while away from the program:

Name \_\_\_\_\_

Phone Number \_\_\_\_\_