

**Epiphany Catholic School**  
**5557 S. W. 84 St.**  
**Miami, FL 33143**  
**305 667-5251**

Student Name \_\_\_\_\_ Homeroom \_\_\_\_\_

**Cell Phone Authorization Form**

I, \_\_\_\_\_ authorize my child,  
\_\_\_\_\_ to have a cell phone with  
him/her during school hours. Both of us understand that the phone **shall NOT, under any  
circumstances, be a camera phone** and that it should only be used, if necessary, after school in  
carpool. It shall be kept inside the backpack and turned off at all times. ANY use of the phone  
during school hours, will result in any or all of the following consequences:

- The phone will be taken away from student.
- A Saturday detention at 7:45am will be served.
- A meeting will be scheduled with parents and Ms. Ana Oliva.

In addition, if a student has a phone without a signed permission slip on file, he/she will serve a  
Saturday detention.

Parent Signature: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date Read and Signed: \_\_\_\_\_

Student Name \_\_\_\_\_ Homeroom \_\_\_\_\_