

EARLY DISMISSAL
PICK UP AT DISMISSAL

Date: _____ Time: _____

My child will be picked up/leaving early today:

Child's Name (Please Print)

Teacher: _____

Name of person picking up child. _____
Name of person (Please Print)

Reason: _____
Please give brief description

He/She *will* *will not* be returning to school.

I may be reached at: _____
Work / Cell / Home Telephone Number

Parent/Guardian Signature

*I understand that proper photo ID is needed for
whoever is picking up my child.*

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