EARLY DISMISSAL NEEDED FOR STUDENT

Please use this form to inform our Attendance office that you have to pick up your child prior to the end of the school day. It is recommended that you complete this form as soon as possible. Please be reminded that:

- 1. A Parent or Guardian, who is listed on your child's emergency card, must come in to sign your child out. (This note should help make the process more efficient).
- 2. Students who drive to school need parent permission to leave school during the day and may not return during the school day once they have left. If a student with driving permission has to leave school and return, he or she must be picked up by a Parent or Guardian.
- 3. If your child is leaving and returning (for instance, for a doctor visit), he or she does not need to sign back in. Your child should go directly to class upon returning to school.

2.	Child's Last Name:		
∠.	Child's East Ivalife.		
3.	Child's Grade:		
4.	Date of Early Dismissal:		
5.	Time of Early Dismissal:		
6.	Reason:		
	Doctor/Dental Vis	t – Please bring note upon return	
	Road Test – Pleas	bring appointment slip	
	Other:		
Parent/Guardian Name (Please Print) Parent/Guardian Signature Parent/Guardian Phone # or			r Email