TODAY’S DATE: ________________

STUDENT’S NAME (FIRST & LAST): ________________________

TEACHER: ___________________________________________

PARENT/GUARDIAN SIGNATURE: ____________________________

☐ WILL BE PICKED UP EARLY:  (MUST BE SIGNED OUT IN OFFICE)
   Date: ___________________________________________
   Time: ___________________________________________
   By Whom: _______________________________________
   Specific Reason: __________________________________
      (UNEXCUSED IF NO REASON GIVEN)

☐ AFTER SCHOOL CHANGE:
   Date: ___________________________________________
   □ Parent Pickup: ___________________________________(By Whom)
   □ Send to EdVenture Club
   □ Ride Bike/Walk Home/LHLA
   □ Ride Bus Home/Daycare:  Bus #______________

STAFF INITIALS: _____________

TODAY’S DATE: ________________

STUDENT’S NAME (FIRST & LAST): ________________________

TEACHER: ___________________________________________

PARENT/GUARDIAN SIGNATURE: ____________________________

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