

SUPERVISION AFTER SCHOOL DISMISSAL FORM
REQUEST FOR SUPERVISION AT DISMISSAL FROM SCHOOL FOR PUPILS IN GRADES K-8

Student's Name _____ Grade _____ HMRM _____

Please check all that apply:

Attached Documents:

I have read and understand District Policy 8601 and the school calendar. (This form as well as the policy and school calendar will be located on the district website).

_____ Yes, I have read and understand District Policy 8601 After School Dismissal.

_____ Yes, I have reviewed the school calendar and understand the days that school is in session.

STUDENT SUPERVISION AFTER SCHOOL

Walkers

_____ My child does not have permission to leave school at dismissal (end of school day or end of a school sponsored activity) unless escorted by a parent/guardian or designated escort (if checked, please fill out the information below).

_____ My child has my permission to walk home or ride home from school supervised at dismissal with the following authorized designated escort(s):

Name _____

Home Phone _____

Relationship to Child _____

Cell Phone _____

Work Phone _____

Name _____

Home Phone _____

Relationship to Child _____

Cell Phone _____

Work Phone _____

_____ My child has my permission to walk home from school unsupervised at dismissal or at the conclusion of an after school program.

_____ My child has permission to ride his/her bicycle home from school unsupervised at dismissal or at the conclusion of an after school program.

By signing this form, I acknowledge that I have received and reviewed the school calendar and Board Policy 8601 After School Dismissal. I agree to cooperate with the provisions set forth in law, Board policy and the arrangements outlined. I agree to be on time and adhere to the pickup and drop off times designated for dismissal from school or school sponsored activities.

Parent/Legal Guardian:

Name _____ Signature _____ Date _____