

# Lockwood Elementary After School Change Authorization

Today's Date: \_\_\_\_\_ Date of Change: \_\_\_\_\_

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

Teacher: \_\_\_\_\_

**DIFFERENT BUS/STOP**

Riding bus No. \_\_\_\_\_ OR  Same bus/different stop

with (student) \_\_\_\_\_

**DIFFERENT PICKUP**

Picked up by \_\_\_\_\_  
(full name)

at \_\_\_\_\_ KMS Parent Pick Up *OR* \_\_\_\_\_ LW Parent Pick Up

**STAYING AFTER SCHOOL FOR** (LW approved Activities only.)

\_\_\_\_\_ (Activity & Location)

**LEAVING EARLY** at \_\_\_\_\_ for \_\_\_\_\_  
(Time) (Reason)

**OTHER** \_\_\_\_\_

Parent/Guardian Signature (required)

\_\_\_\_\_