

# MILLER PLACE HIGH SCHOOL

15 Memorial Drive ▪ Miller Place ▪ New York ▪ 11764

(631) 474-2723

Fax (631) 474-1734

Seth A. Lipshie, Superintendent  
Susan G. Craddock, Assistant Superintendent



Kevin M. Slavin, Principal  
R. Sean White, Assistant Principal/Director Guidance  
Diana L. Tufaro, Assistant Principal  
Debra A. White, Assistant Principal

---

---

## EARLY DISMISSAL PROCEDURES

*We prefer that students remain in the building for the entire school day and use study halls in a constructive way, however, permission to leave early will be granted to your child, pending your approval of the following rules and regulations:*

1. Students **must** leave school grounds at the conclusion of their last period class, regardless of weather. Students must provide their own transportation rather than coming back to use the regular 1:52 p.m. buses.
2. Parents understand that school insurance terminates when the student leaves the school grounds.
3. Parents and students understand this privilege can be revoked at any time by the administration if these or other school rules and regulations are not adhered to.
4. Students are responsible for completing the form below. *The form can be submitted to the main office prior to the first day of school.*

Please indicate your approval of this request by signing the bottom of this form. **This letter must be returned to the main office with your signature before student permission will be granted to your child.**

**Students cannot leave school early until they receive permission from the Assistant Principal and/or Dean of Students.**

*If there are any questions regarding this policy, please call the High School office at 474-2723, ext 301.*

I have read the above, and do grant permission for \_\_\_\_\_ to leave school grounds at the conclusion of their academic day:

- |   |   |   |   |                                |
|---|---|---|---|--------------------------------|
| <input type="checkbox"/> 6 <sup>th</sup> Period "A" | <input type="checkbox"/> 7 <sup>th</sup> Period "A" | <input type="checkbox"/> 8 <sup>th</sup> Period "A" | <input type="checkbox"/> 9 <sup>th</sup> Period "A" | <input type="checkbox"/> BOCES |
| <input type="checkbox"/> 6 <sup>th</sup> Period "B" | <input type="checkbox"/> 7 <sup>th</sup> Period "B" | <input type="checkbox"/> 8 <sup>th</sup> Period "B" | <input type="checkbox"/> 9 <sup>th</sup> Period "B" |                                |

---

---

Student Name \_\_\_\_\_

Student Signature \_\_\_\_\_

Parent Name \_\_\_\_\_

Parent Signature \_\_\_\_\_

---

---

### FOR OFFICE USE ONLY

Date Collected \_\_\_\_\_

Person Collecting \_\_\_\_\_