



## Early Dismissal Request

Student Legal Name: \_\_\_\_\_

Reason for dismissal: \_\_\_\_\_

Date of dismissal: \_\_\_\_\_

Time of dismissal: \_\_\_\_\_

Parent signature: \_\_\_\_\_

Parent name (printed): \_\_\_\_\_

Parent phone number: \_\_\_\_\_

**\*\*Please return to the Attendance Office before  
classes begin, in between blocks or at lunch.**

**Not at the time of dismissal.\*\***