

Student Dismissal Note



Student Name:

(First and Last Name)

**Homeroom/
Teacher Name:**

Dismissal Date(s):

please check

☐
☐

"Walker"

☐

Appointment

Parent Pick-Up /
"Car Rider"

Pick up Location:

Appointment Pick Up Time:

☐ Elementary Side

AM

PM

FULL Name of Parent/Adult Picking Up Student:

Note/Additional Info:

**Office Use ONLY **

Teachers please verify by initialing.

Teacher/ Homeroom #	Office

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