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| **Student First and Last Name** |  |
| **Teacher Name** |  |

**My child will be dismissed as follows unless written notification of change is given (choose one):**

\_\_\_\_ Bus Rider (Only if child qualifies based on home address) – Will line up in multipurpose room.

\_\_\_\_ Car Line rider- Will line up in gym and be picked up in car line.

\_\_\_\_ West Walker – Will line up in hallway and exit at Door 12.

\_\_\_\_\_ East Walker – Will line up in hallway and exit at Door 2

\_\_\_\_ Gym Walker – Will line up in Gym and exit at Door 5.

\_\_\_\_ Day Care Name of Day Care Provider (\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

This will be my child’s daily plan for dismissal unless I notify my child’s teacher or the office of a change in writing.

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Parent/Guardian Signature Date