



Central Elementary School
Dismissal Change Form

(Note: One form is required per student, as each teacher needs his/her own copy.)

To: _____ Student Name: _____ Date: _____
(Teacher)

From: _____ Parent/Guardian Signature: _____
(Parent/Guardian Name)

Usual way my child gets home: (circle one) Bus 14 Bus 24 Bus 67 Bus 68
Walk Car Childcare

Today my child:

_____ Will be picked up by _____ at 3:15.

_____ Needs to be picked up in the office at _____ due to _____.
(Time) (Reason)

_____ Staying after school to participate in _____ Teacher Initials: _____

_____ Other: _____



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