



Temporary Change in Dismissal Form

Please use this form any time you make a change to your child's dismissal plans and send it to the classroom teacher.

Today's Date: ___/___/___

Student's name: _____

Teacher's name: _____

Parent Signature: _____

Please check all that apply:

- For TODAY only
- For THIS WEEK only
- For the following dates only: _____

- Car Pick-Up
Student will be picked up by: _____
- Walking Home
- Bus (#____)
- Early Dismissal
Time: _____
Reason: _____

Questions about this form? Please contact our main office:

(978) 247-9700