



Early Dismissal Form

Dear Parent/Guardian: Please complete this form in its entirety and have your daughter turn it into the front office a day prior to her appointment, or the day of, if it is a last minute appointment.

Student Name: _____

Please dismiss my daughter from school on _____
(day and date)

at _____ a.m./p.m. for an _____
(time) (reason)

She will/will not be returning.
(circle one)

She will/will not be driving herself.
(circle one)

Parent/Guardian Signature

Date

Student Signature