2024-2025 DISMISSAL/TRANSPORTATION CHANGE

Student(s) name (first & last)	
Te cher(s) name	Date
PICK UP/EARLY DISMISSAL CHANGE	
\square I will pick my child up ~OR~ \square (first name & last name of person)	will pick my child up
□ Today □ 2024-2025 school year □ Other dates	
□ Picking up early (time) □ AM □ PM	
Reason: Appt Parent Pickup Other	Returning to school? ☐ Yes ☐ No
BUS TRANSPORTATION CHANGE	
(Permanent changes only! Your request may take up to a week to be approved Please drop my child off at (first name & last name)	
Address (include house #)	
Relationship (ex. grandparent, babysitter, etc.)	
Parent/caregiver name (print)	
Parent/caregiver signature	
2024-2025 DISMISSAL/TRANSPOR	
Student(s) name (first & last)	
Teacher(s) name	<u>'</u>
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Reason: Appt Parent Pickup Other	Returning to school? ☐ Yes ☐ No
BUS TRANSPORTATION CHANGE	
(Permanent changes only! Your request may take up to a week to be approve	
Please drop my child off at (first name & last name)	
Address (include house #)	
Relationship (ex. grandparent, babysitter, etc.)	Bus letter
Note: Kindergarten students MUST be met by a parent/caregiver at the	bus stop and will NOT be dropped off otherwise.
Parent/caregiver name (print)	Phone #
Parent/caregiver signature	