

MANDATORY #2

CLARENDON SCHOOL

Release of Student at Dismissal From School

2019 - 2020

School employees are expected to know and supervise the implementation of parents'/guardians' plans for dismissal. It is the responsibility of parents/guardians to notify the school as to the preferred plan for the dismissal of their children, as well as be familiar with the school calendar and dismissal times. Please read the choices below in order to let school officials know how your child should be released at dismissal time and indicate your preference. **All students in grades K thru 3 must be picked up by an adult/or a sibling of appropriate age.**

Child's Name _____ 2019-2020 Grade _____

1. ___ My child is aware of our family plan for leaving school grounds each day. The supervising staff member will dismiss my child from the assigned door at the designated time. My child knows to return to the teacher or main office if there is an unexpected change in our plans. ****Please note:** This option should be selected if the child **walks home** alone or with a group, or if a parent (or other adult/group) meets the child at a designated location other than the dismissal door on a regular basis. ***** STUDENTS in GRADES 4 and 5 ONLY*****
2. ___ My child takes the **bus**. If your child is not going home on the bus for any reason a **NOTE** must be provided to the main office with an assigned pick up person listed.
3. ___ My child may be released by the supervising staff member **ONLY to the following:**
****Please note:** If this option is selected, make sure to include all care givers and siblings.
4. ___ My child will go directly to **AFTERCARE** unless the office is notified in writing that they will not attend that day or any longer.

I understand this request shall be for every school day, including one-session and early closing days due to emergencies, and shall apply for the duration of time designated in Board Policy 8601. The following persons are designated to pick-up my child(ren) after school dismissal in accordance with the terms of Board Policy 8601.

NAME:

PHONE #

I understand that school personnel will follow the plan indicated above every day. Changes to this plan may only be made in writing and given to the teacher in advance of the anticipated change. I have reviewed the school calendar on the district website and will plan accordingly.

Parent Signature

Date

Print Name