Grades K-8 Only --- DISMISSAL PROCEDURE

- Please complete one portion for EACH child and return individually to each SEPARATE classroom teacher on the first day of school.
- IMPORTANT: Notify the teacher IN WRITING if dismissal plans change throughout the school year. If Dismissal will be different the first 3 days of school (½ days) please advise under separate cover.

| Child's Name: | Grade: |
|------------------------------------|-------------------------|
| Check One Box Below | |
| ☐ Walker/Biker without Supervision | |
| ☐ Pick-Up | |
| ☐ District: | Route #Bus#Bus Company: |
| Any additional info: | |
| Parent initials: | Date: |
| | |
| Child's Name: | Grade: |
| Check One Box Below | |
| ☐ Walker/Biker without Supervision | |
| ☐ Pick-Up | |
| ☐ District: | Route #Bus#Bus Company: |
| Any additional info: | |
| Parent initials: | Date: |
| | |
| Child's Name: | Grade: |
| Check One Box Below | |
| ☐ Walker/Biker without Supervision | |
| ☐ Pick-Up | |
| ☐ District: | Route #Bus#Bus Company: |
| Any additional info: | |
| Parent initials: | Date: |