

# Leave within the School Day

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Child's Name: \_\_\_\_\_

Child's Class: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_

Reason for Early Pick-up: \_\_\_\_\_

\_\_\_\_\_

Can you provide relevant appointment documentation? Yes/No (please circle)

Does this qualify as an emergency? Yes/No (please circle).

Are you aware that this is against school policy? Yes/No (please circle).

Are you aware that your child is missing out on valuable school time? Yes/No (please circle).

She/he will be out of school from \_\_\_\_\_ am/pm to \_\_\_\_\_ am/pm

She/he will be out of school from \_\_\_\_\_ am/pm for the remainder of the day

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Senior Leader's Signature: \_\_\_\_\_

Date: \_\_\_\_\_