

RAYMOND SCHOOL DISTRICT



CHANGE OF DISMISSAL FORM

If you have a change from the normal plan in dismissal, please complete this form and send it with your child to the teacher/main office on the morning of the day the change will occur.

Student Name: _____

Grade: _____ Homeroom Teacher (Grades PreK-8): _____

Date of Change: _____ (This change is temporary for this date only.)

_____ **EARLY DISMISSAL**

Dismissal Time: _____

Reason for Early Dismissal: _____

Student will be picked up by:

_____ Parent/Guardian

_____ Other: _____
Must be an authorized pick-up contact.

_____ Student will drive himself/herself (RHS only)

_____ **BUS CHANGE**

Today, my student will ride on the _____ bus with

Name of student going home with

Address of student going home with

Parent/Guardian (Print Name): _____

Signature (Required): _____

I can be reached at: _____