

**Student Dismissal Directive Form
2009-2010**

Name of child/children _____
Last Name First Name(s)

Please read carefully and check the appropriate space to ensure your child is dismissed correctly

My child is to be dismissed daily to **Extended Care** _____

My child is to be dismissed daily to the **Car Line** _____

My child is to be dismissed daily as a **Walker** _____

*As a walker, my child is to be escorted _____ unescorted _____

Please note, if your child is walking home with a middle school student, they will be held until middle school dismisses at 3:30 pm.

My child/children have my permission to walk to/from Saint Patrick Catholic School.

Parent Name

Phone Number

Signature

Date

Copies: Front Office, Homeroom Teacher