Carver High School of Engineering & Science

Student Request for Early Dismissal

Forms are available on our website carverhses.net - under parent - forms

Today's Date: _____

Child's Name: _____

Child's Grade: _____

Early Dismissal Date: _____

Early Dismissal Time: _____

Reason for Early Dismissal: _____

(PRINT) Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Parent/Guardian Contact Number (Cell): _____

Parent/Guardian Contact Number (Home or Work): _____

READ. READ, READ. READ INSTRUCTIONS

Please return this form to Ms. Pat Logan during your advisory period to be verified.

Please do not return this form to us when it is time for you to leave for your early dismissal.

***A contact number must be given to the school, to verify your child's early dismissal. If a parent or guardian can not be reached, it is possible that the early dismissal will not be approved by the school.**

***All students with appointments, must bring a doctor's note to the main office, on the next school day, to verify their appointment, and to receive an official, excused, early dismissal, from the school.**

***All early dismissals for students, will be coded unexcused, until verified with an official note from a parent/guardian or a medical office.**

P. Logan, Attendance Office _____: Verified By Staff Member