

**DEER LAKES HIGH SCHOOL
PARENTAL REQUEST FOR STUDENT EARLY DISMISSAL**

Student must hand this to the Attendance Window by no later than **7:59 AM**.

Student's first & last name: _____		Grade: _____
The student listed above needs an early dismissal from school on: _____ at _____		
<i>Insert date above</i> <i>Insert time above</i>		
DLSD policy requires an explanation from the Parent/Guardian for the student's early dismissal. Please check one below:		
<input type="checkbox"/> Doctor/Medical/Dental/Orthodontist/Eye dr. appt. <i>please circle one</i>	NOTE: A doctor/medical/dental/eye excuse must be turned in within 3 days of the student's return or the early dismissal will be unlawful.	
<input type="checkbox"/> College/School visit	NOTE: A letter from the College/School must be turned in within 3 days of the student's return	
<input type="checkbox"/> Court hearing / Legal meeting	NOTE: A court document or a copy of a subpoena must be turned in within 3 days of the student's return	
<input type="checkbox"/> Funeral	Relationship to student:	
<input type="checkbox"/> Vacation/Family trip	NOTE: If student will be absent for more than one day, they must also complete an Educ/Trip/Vac. form	
<input type="checkbox"/> Other - YOU MUST EXPLAIN: →		
First & last name of the person picking the student up: _____		
NOTE: Anyone picking up a student <u>MUST</u> come in to the office & sign the student out. You <u>MUST</u> show a driver's license in to the camera located where you buzz in or you will <u>NOT</u> be allowed in to the office!		
My son/daughter drove to school and has my permission to leave on the date & time listed above. <input type="checkbox"/> YES <input type="checkbox"/> NO		
SIGNATURE OF PARENT/GUARDIAN _____		DATE _____