

FORM 2 (PLEASE SUBMIT TO THE OFFICE FIRST THING IN THE MORNING AND GET A PINK SLIP FOR YOUR CHILD TO GET OUT OF SCHOOL EARLY)

EARLY DISMISSAL NOTE

(Date)

MRS. LEWKO

PLEASE ALLOW MY CHILD _____ TO LEAVE AT
(full name)

_____ TODAY.
(time)

REASON _____

(Parent's/Guardian's Signature)

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