

Covenant Love Community School Student Dismissal Plan

Please complete this form and return it to CLCS as soon as possible. This form details the every-day plan for each child, and gives the school permission to release that child to other persons you list in Section 1. This form also allows you to expressly deny permission to release that child to those you name in Section 2.

Student Name:				Grade:	
Student Name:				Grade:	
Student Name:				Grade:	
Student Name:				Grade:	
Parent(s)/Guardian(s)Name(s):					
Section 1 – Every-day Dismissa	al Plan and Permissions:				
At dismissal time, the above-named cl	nild will routinely:				
ride the bus.					
be signed out by the parent(s)/guard	dian(s) listed above.				
attend CLCS's After School Program on the following weekdays. (please circle): M T W Th F					
ride in the carpool with, (and be signed out by), the following drivers:					
be signed out by the authorized ind	ividual(s) named below:				
I give permission for my child to be released by CLCS staff to the following:					
Name	Relationship to Student	Pickup Schedule (please circle)	Cell Phone	Alternative Phone	
		M T W Th F			
		M T W Th F			
		In Emergency			
		In Emergency			
This permission is for the 2019/20 s	chool year, and if modification	ons need to be made	, I will complete a new co	ppy of this form.	
This form is for every-day dismissamust send an email or handwritten rechild to anyone not listed above.					
Section 2 – Permission Withheld:					
I DO NOT give permission for my c	child to be released by CLCS	staff to the followin	g person(s) without my p	rior authorization:	
Name(s):					
	gned: Date:				
Signed: Date: Date:					