

C.R. WEEKS ELEMENTARY SCHOOL
REQUEST FOR EARLY STUDENT PICK UP

STUDENTS LEAVING PRIOR TO DISMISSAL TIME, FOR APPOINTMENTS OR OBLIGATIONS

PRINT FULL STUDENT NAME	<u>>ONLY ONE STUDENT PER FORM<</u>	Teacher	
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WILL BE PICKED UP BY (FULL NAME) _____

<u>PICKUP DATE</u>

<u>PICKUP TIME</u>

SIGNATURE OF PARENT or LEGAL GUARDIAN
**Please Note: Students will not be dismissed from class until
a parent or guardian has arrived to pick them up.*

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