PLEASE FILL OUT ONE PER STUDENT!!!



Grand Day Early Dismissal Permission Slip

Student Name: _		
Homeroom:		
0 0	rmission to be dismissed on F of Grand Day activities (appro person(s):	
Name:		
Relationship:		
Parent Name	Parent Signature	Date
In case there are a	any questions, I can be reache	ed at the
following phone no	umber:	