

Si vous avez des questions sur les activités publicitaires, veuillez contacter l'école de votre enfant.

VERY IMPORTANT INFORMATION

ALL STUDENTS K-8 ARE TO TURN IN THIS FORM COMPLETED BY A PARENT/GUARDIAN TO THEIR HOMEROOM ON THE FIRST DAY OF SCHOOL

2023-2024 SY DISMISSAL PLAN

In order to ensure a smooth dismissal process, a completed Dismissal Plan form is REQUIRED on the first day of school for each child.

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Homeroom: \_\_\_\_\_

At dismissal, my (son daughter ) will:

(Please choose/describe below ONE (primary) after-school dismissal procedure for your child)

Check One:	Dismissal Option	Start Date
	WALKER: These students will be considered "walkers" and will be dismissed at 3:45 p.m. with an announcement for the dismissal of car riders and walkers. Students will exit main entrance.	8/28/23 (Yes/No)  If NO, start date _____
	CAR RIDER: Students being picked up by a parent/guardian or aftercare provider are considered "car riders" and will be dismissed beginning at 3:45 pm. As parents/aftercare providers arrive, they will need to sign students out via the assigned grade level location (K-2, rear cafeteria door; 3-4, main entrance; and 5-8, gym door). Parents will sign students out using the PickUp Patrol App.  Name of Parent/Designee: _____  Cell Phone of Parent/Designee: _____  Or Name of After Care Program: _____  Address: _____  Contact Number: _____ *Please Note, ALL students must be signed out. Students are NOT ALLOWED to exit the building and meet a parent/designee or after care provider vehicle in the parking lot.	8/28/23 (Yes/No)  If NO, start date _____
	BUS RIDER: Students riding a PGCPSS bus will be considered bus riders. Dismissal begins for bus riders at 3:50 p.m. Buses will be assigned a state (students will be told the state on the first day of school) and the state and bus route number will be called when their bus arrives. Please make sure your student knows his/her 3 digit bus route number.  P.M. bus route number: _____  Address of the afternoon bus stop: _____	8/28/23 (Yes/No)  If NO, start date _____

Parent Name/Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Information: (cell) \_\_\_\_\_ work/home: \_\_\_\_\_

