

**FATHER JUDGE HIGH SCHOOL
STUDENT SERVICES OFFICE
215-338-9494, ext. 1114
215-338-0250 Fax**

EARLY DISMISSAL FORM

Please return this form to the Student Services Office no later than the morning of the early dismissal. Student drivers are permitted to leave early with signed permission form and a phone call from the parent/guardian. All others, a parent or guardian must come into school to sign the student out.

NAME _____ SECTION: _____ STUDENT # _____

DATE AND TIME OF EARLY DISMISSAL: _____

REASON FOR EARLY DISMISSAL: _____

NAME OF DOCTOR/DENTIST: _____

VERIFICATION PHONE NUMBER OF
PARENT/GUARDIAN: _____

SIGNATURE OF
PARENT/GUARDIAN: _____

_____ MY SON DRIVES TO SCHOOL AND WILL DRIVE TO THE APPOINTMENT
(PHONE VERIFICATION IS ALSO REQUIRED)

_____ I WILL COME TO SCHOOL AND SIGN STUDENT OUT

_____ I AM UNABLE TO COME TO SCHOOL AND THE FOLLOWING ADULT WILL

PICK MY SON UP _____
(PHONE VERIFICATION IS ALSO REQUIRED)

PROPER MEDICAL CERTIFICATION IS REQUIRED UPON STUDENT'S RETURN

(Signature at the time of dismissal)

(Date and Time)