SIGN OUT REQUEST

TO: Receptionist at CPMS

CHILD NAME: _____

GRADE: _____ **STUDENT ID:** _____

DATE OF SIGN-OUT: _____

TIME OF SIGN-OUT:_____

SIGN-OUT REASON: _____

Note: Upon receiving this note the student will receive an early release pass to present to his/her teacher at the beginning of the class the student will be released from. The parent or guardian picking the student up must be listed on the Enrollment Card on file with CPMS. Prior written approval is required for anyone not listed on the Enrollment Card in order to release the student. The student must sign back in at the Attendance Office with a medical note for all medical appointments. A parent note or parent sign-in at the Attendance Office
is required for any child reentering school without a medical note.

_____ _____

Parent/Guardian Signature Date

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