OFF CAMPUS NOTE
(parent request to leave school during the day)

_____________ will need to leave school today at __________

please PRINT student’s name

time leaving

He/she has a ____________________________ reason for leaving, i.e, medical or dental appt., family circumstance, etc.

returning? Y N

____________________________    ________________________
Is student driving themselves OR indicate who is picking up the student

(775) ___________ - __________________________
contact phone #

Parent’s Signature

PRINT parent’s name

relationship to student