Long Hill School Dismissal Change Form

Student Name __________________________ Grade/Teacher_______________________

Date of Change ___________ Parent/Guardian Name________________________________

Type of dismissal change (please check one):

☐ Parent pick up at 3:45 in the cafe--Name of person picking up ______________________

☐ Early Parent pick up at _______ in the main office--Name of person picking up

                                                                                       ______________________

☐ Change of person picking up at dismissal--Name of person picking up

                                                                                       ______________________

☐ Other ____________________________________________________________________________