

Striving For Excellence!!



# PS 306

40 West Tremont Ave. ~ Bronx, NY 10453

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[www.ps306bronx.org](http://www.ps306bronx.org)

**Darryl Harrington ~ Principal**

*Sojourner Greer, AP ~ K-1*

*John Hickman, AP ~ 2-3*

*Robert Montanaro, AP ~ 4-5*

Dear Family:

As you are aware, you have chosen an educational model where your child attends school both in person at school and remote learning outside of the school building. The Letter Day calendar is attached for you to follow. Breakfast and lunch will take place in the classrooms. The Morris Heights Clinic will still be available by appointment only. Please sign and return this letter to your child's teacher by Friday October 2<sup>nd</sup>, 2020. Students will be escorted to and from class by school staff. At this time, parents will not be allowed to come into the building, unless there is an emergency or an appointment. The front and the rear of the building will be open for arrival and dismissal. Please indicate on the permission slip, if your child will leave from the front or rear of the building.

Arrival Time- 8:30 am

Dismissal Time- 1:50 pm

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## STUDENT FOR BLENDED LEARNING – PERMISSION SLIP

Student Name: \_\_\_\_\_ OSIS Number: \_\_\_\_\_

Student DOB: \_\_\_\_\_

I \_\_\_\_\_ give my child \_\_\_\_\_ permission to leave school and travel home unaccompanied by an adult, at 1:50 pm on the day they are participating in Blended learning.  
**Front** of the building \_\_\_\_\_ **Rear** of the building \_\_\_\_\_

I \_\_\_\_\_ **DO NOT** give my child \_\_\_\_\_ permission to leave school and travel home unaccompanied by an adult, at 1:50 pm on the days that the/she is participating in Blended learning.

**I understand that my authorization will be kept on file and that I am responsible for my child when he/she leaves the school premises.**

Parent Name (please print): \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date \_\_\_\_\_