



Daily Dismissal Plan 2019-20

Student Name (First and Last) _____

Grade _____ Teacher _____

Name of Morning Day Care, if any _____

Name of Afternoon Day Care, if any _____

HOME BUS #

****Complete or check box as it applies****

	Bus # To School	Bus # From School	Destination details (if other than home)	Pick-up @ dismissal
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				

My child may be dismissed to the following adults other than parents/guardians (Please note: ONLY those listed here or on your child's Emergency Card may sign out your child):

*In the event that there is a question about your child's dismissal plan, please list a telephone number and an email address where you can be reached **during school hours**.

PHONE# _____ EMAIL: _____

If a one-day change to this daily dismissal plan is required, please use the orange DMS Change of Dismissal Form. Copies of these form are available in the office and on the DMS website.

Parent/Guardian Signature: _____

Date: _____