LATE ARRIVAL / EARLY RELEASE REQUEST FORM

To participate in our late arrival/early release program, students must have a Study Hall 1st, 2nd, 11th or 12th period (schedule adjustments will not be made). To maintain this PRIVILEGE a student MUST:

1. Have no major or excessive violations of the Student Code of Conduct
2. Have no excessive tardiness and maintain a 95% attendance rate
3. Maintain at least a quarterly GPA of 2.00 or higher, AND/OR demonstrate improvement from the previous semester
4. Have a signed late arrival/early release form on file in Student Services
5. Have no outstanding student fees.

**Final Determination of Eligibility Remains with Building Principal, as other relevant factors may need to be considered on a case-by-case basis.

Students must follow these regulations

1. Arrive no sooner than 10 minutes prior to their first class.
2. Must vacate the school building immediately following your last scheduled period.
3. May not loiter in any area inside the school or on school property including any other school properties. If returning from a school-sponsored activity, students on late arrival/early release may return after 3:00. Sitting in cars is prohibited.
4. Responsible for their own transportation. Make arrangements ahead of time for pick-up. If driving, you must have vehicles registered in Student Services.
5. Late arrival/early release must be signed by the student and the parent. No exceptions for 18 year olds.

CONSENT FORM

We have read the regulations criteria for late arrival/early release, and understand them. I am requesting that my student have their schedule amended to facilitate either late arrival or early release. We understand that we assume sole responsibility for the health and safety of the student during released time.

Period(s) I am requesting for Late Arrival _______________ Period(s) I am requesting for Early Release _______________

PRINT STUDENT’S NAME ____________________________________________________________________________________________________________________________________________________________

_________________________                        _________________
Parent Signature                                     Student Signature

RETURN TO YOUR GUIDANCE COUNSELOR IN STUDENT SERVICES OFFICE

OFFICE USE ONLY:

_________ Meets Criteria           __________ Does Not Meet Criteria         _________________  Start Date