

Permanent Pick-up Form for Students at School

During this school year, my child will be a Permanent Pick-up from Central Columbia Elementary School. I will meet my child in the cafeteria at approximately 3:35pm. If this should change for any reason, I will notify the elementary school office by 2:00pm on that day so my child may be notified how they will be going home. Any students not picked up by 3:45pm will be taken to the office.

If you wish to stop picking your child up after completing this form, we will require written notice which includes end date, child's name, and your signature.

Student Name: _____

Grade: _____ Teacher Name: _____

Parent Name Printed: _____

Parent Signature: _____ Date: _____

My child will be picked up: (Circle all that apply)

Mon. Tues. Wed. Thurs. Fri. Everyday

Person(s) who may pick up my child:

<u>Name</u>	<u>Relationship</u>	<u>Name</u>	<u>Relationship</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

****PLEASE CONTACT THE SCHOOL OFFICE (570-784-2850 Ext. 1000) TO ADD OR REMOVE ANY NAMES.**