



## Student Release Time Request

School \_\_\_\_\_ Date \_\_\_\_\_

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_

Reason for requesting release:

- \_\_\_\_\_ Attending college classes off campus
- \_\_\_\_\_ Participating in Work Study Program
- \_\_\_\_\_ Participating in Seminary or Other Religious Instruction
- \_\_\_\_\_ Other (please specify) \_\_\_\_\_  
\_\_\_\_\_

Period(s) student will be off campus (circle):

1    2    3    4    5    6    7

Departure time \_\_\_\_\_ Return Time \_\_\_\_\_

Date release starts \_\_\_\_\_ Date release ends \_\_\_\_\_

For students attending college classes, please indicate the names of each course:

---

Parent /Guardian Permission:

I request that my student be allowed to leave the high school campus for the purpose and time frame indicated above. I release the school and district from liability and responsibility for my son/daughter during that time period. I understand that I am responsible for their transportation, their supervision, and their welfare during this time.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date