

GLEN HEAD SCHOOL
Change in Going Home Arrangements

Date _____ Teacher's Name _____

Please be advised that my child, _____, will be changing his/her going home arrangement for today.

This afternoon he/she **IS GOING TO...**

be picked up by _____ at _____ am/pm.

go home with _____

NS Before/After School Child Care

Extra Help with Teacher _____

Club _____

PTO After School Program _____

Other (please specify) _____

I will also be picking up (name of student & teacher) _____

Additional Notes:

Parent Signature

REMINDER: STUDENTS MAY ONLY TAKE THEIR ASSIGNED BUS TO THEIR ASSIGNED STOP.