

After School Permission Form

Please fill out and **print** this form and return to the librarians before you attempt to stay after school in the library.

My child _____ Grade ____ has my permission to stay after school to do
(please print clearly)

Research/study in the library on:

Monday _____
DATE

or Thursday _____
DATE

My child will be:
(please check one)

walking home

getting picked up before 4:35

* riding the activity bus, (bus number) _____

*Note: not always available

STUDENTS: Return this slip to the librarian promptly to be sure she is available to stay after school on that day.

Parent signature: _____ Date: _____

Cell phone: _____ 2nd Phone number: _____