

Study TEAM Permission Form

_____ will attend Study TEAM.

(Student Name)

My child will: _____ Walk home with _____

_____ Be picked up by parent or guardian

_____ If no homework that day, student may go home right after school

_____ Other (please explain below)

Phone number parent/guardian can be reached after 3:30 pm _____

Parent/Guardian Signature _____

Students must depart at 4:30. School staff supervision of students stops at the end of Study TEAM except in the case of an emergency .