

GHAES Dismissal Change Form

Date: _____ Teacher: _____

Student Name: _____

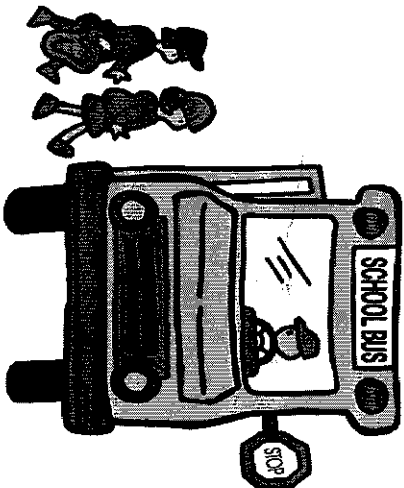
➤ My child will be going home ◀

This change is for:

today following date(s):

Parent Signature

Parent Phone #



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