



FLHS Student FSA/EOC Sign-Out Form

The purpose of this form is to obtain the parent/guardian's dismissal permission. The parent/guardian MUST be the one to fill out this form and sign the form below. On the day(s) a student has finished an **FSA Exam**, the student may be released from school with parental/ guardian authorization as given by this form. A new form must be completed and submitted each time that a student is to be released during the FSA Exam days. The form must be filled out completely and a **clear copy of parent/guardian ID must be attached** in order for the student to be allowed off campus. Students will only be permitted to leave at the conclusion of an FSA Exam and prior to the start of the next exam. Students will not be permitted to leave campus during FSA Exam times.

Student Information		
Student Name (Print)	Last:	First:
Student Number		
Date of release (mm/dd/yyyy)		
Time of release		
Indicate method student will get home, please be as specific as possible	Pick up in car line Drive themselves Walk home Bike home Other (please explain):	

Parent/Guardian Information		
Parent/Guardian Name (Print)	Last:	First:
Parent/Guardian phone number		
Parent/Guardian email address		

Parent/Guardian Name (Print):

Parent/Guardian Signature:

Signature above indicates the parent/guardian of the student mentioned above authorizes the early dismissal of the student from school.

Date: _____

Reminder: A clear copy of a photo ID from the parent/guardian must be attached for student release to be granted.