2024 NOTICE OF LATE RETURN FORM - Elementary (PLEASE PRINT)

This form is to be completed for any student expecting to return to school LATER THAN noon on **Friday, September 6, 2024,** but prior to **Monday, September 30, 2024.**

Please note: If the school cannot verify your child's attendance at school <u>by noon on Wednesday.</u> <u>September 4, 2024</u>, your child's space will be given to another student on the school's waitlist.

The School Phone is	s	The School Email is	
Dear Principal:			
school year but wil	I NOT be in attendance	e in the scl	School for the 2024-2025 hool before noon on pace in your school for my
		_, in Grade	(Sept. 2024)
Last Name Last Name	First Name		
		_, in Grade	(Sept. 2024)
	First Name	First Name	
		, in Grade	(Sept. 2024)
Last Name	First Name		
The expected DAT	E OF RETURN for our	child(ren) i	s
Reason for late re	turn:		
	e will not be held bey		nber 30, 2024.
Parent's Name or L	egal Guardian's Name:		
Address:			
Home Phone:		Day Phon	e (F)
Day Phone (M)			
Date:	Parent S	Signature:	
Alternate Contact/F	Phone Number or e-mai	il	