

**CLARKSTOWN HIGH SCHOOL NORTH**

**SENIOR LATE ARRIVAL/EARLY DISMISSAL FORM**

In the event your son/daughter is scheduled for morning study halls (**Late Arrival**) or for afternoon study halls (**Early Dismissal**), please fill out this form and turn it in to your assigned counselor. This will ensure that your child's schedule indicates the late arrival/early dismissal along with your approval. Please remember, this is a privilege and can be revoked for discipline reasons at any time during the school year.

If we do not have your written consent on file, your child must attend his or her scheduled study halls or he/she will be referred to the appropriate Assistant Principal.

**LATE ARRIVAL**

I give permission for \_\_\_\_\_ to arrive late due to scheduled morning

**Student Name (Please print)**

study halls. The following information indicates the periods and days:

Arrival Period: \_\_\_\_\_ Semester (s): \_\_\_\_\_ Cycle Days: \_\_\_\_\_

Arrival Period: \_\_\_\_\_ Semester (s): \_\_\_\_\_ Cycle Days: \_\_\_\_\_

\_\_\_\_\_  
Student Signature/Date

\_\_\_\_\_  
Parent Signature/Date

**EARLY DISMISSAL**

I give permission for \_\_\_\_\_ to leave early due to scheduled afternoon

**Student Name (Please print)**

study halls. The following information indicates the periods and days:

Last Scheduled Period: \_\_\_\_\_ Semester (s): \_\_\_\_\_ Cycle Days: \_\_\_\_\_

Last Scheduled Period: \_\_\_\_\_ Semester (s): \_\_\_\_\_ Cycle Days: \_\_\_\_\_

\_\_\_\_\_  
Student Signature/Date

\_\_\_\_\_  
Parent Signature/Date

**(DETACH AND RETURN TO SCHOOL COUNSELING CENTER)**