

Indialantic Elementary School Student Dismissal Form: Grades 1-6

Student's Name: _____

Teacher: _____

Grade: _____

Social Distancing is expected on BPS property. Masks are optional. (Subject to change.)

Parents/Guardians are responsible for notifying the school of how their students are to be released as well as being familiar with the school calendar and dismissal times. Please read all areas below prior to identifying your dismissal plan.

In order to help with social distancing, we kindly ask that you abide by the following for **gate dismissal plans**:

- If you live North of Niemira Ave. & East of Ramona Ave. use the Office Gate after buses leave.
- If you live South of Niemira Ave. & East of Ramona Ave. use the South Car Loop Gate. *(No meeting parents here please)*
- If you live North of Franklyn Ave. & West of Ramona Ave. use the North Gate.
- If you live South of Franklyn Ave. & West of Ramona Ave. use the West Gate.

Select one dismissal plan:

____ North Gate*

____ West Gate*

____ Car Loop Gate*

____ Office Gate*

____ Car Loop

____ Bus# _____

____ Brevard After School

____ Busy Bears

**Students signed up for gate dismissal are released to independently get themselves home.*

Dismissal During Inclement Weather:

Per Brevard Public Schools policy for inclement weather, students may only be released after the inclement weather has passed and the all clear has been given. Your patience during these times is appreciated.

I understand that school personnel will follow the plan indicated above **EVERY DAY**. In the event of an unexpected situation, I will contact the school office as soon as possible. It is my responsibility to update this form as needed. I have received, and/or reviewed the school calendar and am aware of all types of changes to the school day (i.e. early dismissal, student holidays, etc.) and will plan accordingly.

Initial to confirm the following:

____ My child has permission to independently travel to and from school.

____ My child knows to go to his/her teacher or the main office if there is an unexpected change to our regular plans.

____ My child is aware of our family plan for leaving school grounds each day.

____ Changes to this plan may only be made in writing & must be given to the homeroom teacher in advance.

____ Students not picked up by 3:00 will be placed in aftercare (\$25 registration fee + \$26 drop in fee = \$51).

Parent/Guardian Signature

Date

Please Print Name of Parent/Guardian