Harvest Christian Academy
LATE START/EARLY RELEASE FORM

Student Name __________________________________________  __________________ 
(Last) (First)

STUDENT PORTION:
Request for the above student is (circle one): Late Start          Early Release
Days (circle days request applies): M T W TH F
Check in time will be at: ___________________________AM
Check out time will be at: ___________________________PM

I will abide by the parameters of late start/early release as stated below in red.

_________________________________________________________ 
Student Name Printed

_________________________________________________________ 
Student Signature                          Date

PARENT/GUARDIAN PORTION:
I give my above student permission to arrive late or be released early from school according to the parameters set up by this form and the HCA Guidance Department.
• LATE START - I understand that my student needs to sign in upon arriving for late start.
• EARLY RELEASE - I understand that my student needs to sign out prior to leaving for early release. Once signed out my student should not return to the HCA campus until after school hours. A student may not hang out in the building but should be going home, to work, to community college, to an internship or job shadow, or to another enrichment situation.
• I understand that if my student arrives or leaves without following the above format OR becomes academically ineligible he/she may lose their privilege for late start or early release.

_________________________________________________________ 
Parent Name Printed

_________________________________________________________ 
Parent Signature                          Date

OFFICE PORTION:
Guidance Department approval _____________________________ Date: _______

THIS FORM IS VALID ONLY AFTER:
Student Completes Form > Parent Signature Obtained > Mrs. Lopez’s Signature Obtained > Turned in to 2nd Floor Reception Desk