

HARVEST CHRISTIAN ACADEMY

LATE START/EARLY RELEASE FORM



Student Name _____

(Last Name, First Name)

STUDENT PORTION:

Request for the above student is (circle one): Late Start Early Release

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.

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:

Student Services Signature

Date

**THIS FORM IS VALID ONLY AFTER:
Student Completes Form > Parent Signature Obtained
> Student Services Signature Obtained > Turned in 2nd Floor Reception**