

# HARVESTCHRISTIANACADEMY

## LATE START/EARLY RELEASE FORM



Student Name \_\_\_\_\_  
(Last Name, First Name)

### STUDENT PORTION:

Request for the above student is (select 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 school.
- EARLY RELEASE - I understand that my student needs to sign out prior to leaving the building.

Once signed out my student should not return to the HCA campus until after school hours. A student may not remain in the building. I understand that if my student arrives or leaves without following the above format OR becomes academically ineligible he/she may lose the 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**