FREDERICKSBURG ELEMENTARY **BUS PASS/LEAVING SCHOOL ANOTHER WAY**

Office Signature_____

BUS PASS/LEAVING SCHOOL ANOTHER WAY Please use this form each time your child will be leaving school in a different way than what is his/her regular schedule. No student is permitted to leave school in another manner without prior permission.	BUS PASS/LEAVING SCHOOL ANOTHER WAY Please use this form each time your child will be leaving school in a different way than what is his/her regular schedule. No student is permitted to leave school in another manner without prior permission
Student Name	Student Name
Grade Date	Grade Date
Teacher	Teacher
Is to walk	Is to walk
Is to ride bus	Is to ride bus
Bus #	Bus #
Will be picked up by	Will be picked up by
Parent/Guardian Signature:	Parent/Guardian Signature:
Office Signature	Office Signature
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