

GLEN ROCK PUBLIC SCHOOLS

Paula Valenti, Ed.D
Superintendent of Schools

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Dear Parents/Guardians,

Due to a New Jersey Supreme Court decision, parents/guardians are required to complete, sign and return to the school the attached form indicating exactly how you want your child to leave school (be dismissed) at the end of the school day. This protocol is to assist the safe dismissal of Glen Rock elementary school students. Parents should consult the **SCHOOL HANDBOOK** for complete information regarding the school calendar, hours, etc.

a. An "Officially Escorted" Student

If a student's parent/guardian designates his/her child as an "officially escorted" student, the student shall be taken to a designated room in school to be picked up and signed out by one of the persons authorized to do so. The individual escorting the student is required to go to the area designated in the school for student pick-up and sign-out.

b. An Unescorted Student

If a parent/guardian designates that his/her child may leave school unescorted, the child will be taken to the school exit and shall leave campus by walking, biking, riding in a car or another method without being signed out and "officially escorted" as described above in item a.

c. A Student Enrolled in the Fee-Based District Sponsored Community School After Care Program (SACC)

If a parent/guardian enrolls his/her child in the district sponsored SACC program, the student will be taken to the SACC program location by a member of the staff and put in the care of a member of the SACC staff. Parents/guardians whose child does not attend the SACC program full time will be responsible for selecting another dismissal option for their child on the days they are not enrolled in the SACC program.

d. Parents/guardians wishing to register their child for the SACC program should contact the Community School at 201-445-7700 extension 5011.

Sincerely,

Paula Valenti, Ed.D.
Superintendent of Schools

PLEASE PRINT THE FOLLOWING INFORMATION:

Name of child: _____

School: _____ Teacher: _____

Receipt and Review of Dismissal Information

1. I read the information regarding the school dismissal.
2. I understand my responsibilities to provide for the safe traverse of my child to and from school in accordance with the calendar and arrival and dismissal times.
3. I understand my responsibility to resume the custody of my child at the end of every school day unless he/she is enrolled in the Community School After Care Program (SACC).

Parent/Guardian signature: _____

Printed Name: _____

Date: _____

Parent/Guardian Choice of Dismissal Process - CIRCLE OPTIONS THAT APPLY AND SIGN BELOW.

1. My child has permission to leave school at normal or early dismissal time unescorted. The individuals listed below are also authorized to take my child home due to an emergency early dismissal.
2. My child is enrolled in the district's fee-based Community School After Care Program (SACC) on the following days. (**CIRCLE DAYS**) The individuals listed below are also authorized to take my child home due to an emergency early dismissal.

MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY

3. My child will be **officially escorted** from school at the end of each day by one of the following authorized individuals. The following individuals are also authorized to take my child home due to an emergency early dismissal or on the days they are not enrolled in the Community School After Care Program (SACC).

PLEASE PRINT ALL INFORMATION

a. _____ / _____
Adult Name Relationship

b. _____ / _____
Adult Name Relationship

c. _____ / _____
Adult Name Relationship

Parent/Guardian signature: _____

Printed Name: _____

Date: _____

THIS FORM MUST BE RETURNED TO THE SCHOOL.