**West Jacksonville Elementary**

2115 Commonwealth Ave., Jacksonville, FL 32209 Phone: (904) 630-6592 Fax: (904) 630-6597 www.duvalschools.org/wjes

# KINDERGARTEN DISMISSAL INFORMATION

Dear Parents/Guardian,

# 2015 - 2016

As parents of kindergarteners, we know that there is a great deal of excitement that you feel when you child enters school. We share your excitement and are busy preparing to ensure children are met with a smooth and easy transition. To contribute to these efforts, we need your assistance.

Parents/guardians of all kindergarten students who will be riding an afternoon school bus are required to read this form and identify a dismissal choice. Please consider the options presented and select the one most suitable for your child. Upon determination, please complete the form below and return it during registration and/or no later than **Monday, August 24th, 2015 - the first day of school or prior to the first day your child rides a bus home.**

To support the safety of all students, it is critical that we have this information. Please know that bus drivers are not generally authorized to return students to school if an adult is not present when the bus arrives at the afternoon bus stop. If the designated adult is not at the bus stop location as agreed, procedures may require drivers to contact the Jacksonville Sheriff’s Office or Department of Children and Families. While these actions may appear extreme, they serve as guidelines that consistently promote the safety and security of students.

Your child’s dismissal information, specifying your preference and understanding of procedures, will be **kept on file at the school and given to the bus driver**. **Drivers are only to transport students for whom they have completed forms.** Thank you for partnering with us to maintain a safe and welcoming school experience for your child.

Sincerely,

Mrs. Floyd-Hatcher

***Please complete and return to the school office by August 24th, the 1st day of school or PRIOR TO THE FIRST DAY YOUR CHILD RIDES A SCHOOL BUS. This form must be on file for your child to be dismissed properly. No child may ride the school bus without your approval submitted by this completed form.***

## I have made the following dismissal arrangement for my child, .

## Parent / guardian contact number if we need to reach you: .

1. **My child will ride the school bus and be met by a parent, guardian, sibling/relative, or neighbor.**

 **Bus # Bus Stop**

**My child can be picked up at the stop by:**

1. **If someone does not meet my child at the bus stop, my child may walk home alone or with a sibling who also rides the bus.**
2. **My child will not ride the bus, and has been enrolled in the Extended Day.**
3. **My child will not ride the school bus, but will be dismissed by car with the**

**following person (s) .**

1. **My child has permission to walk home alone from school.**
2. **Other (specify):\_ .**

**(Print) Parent/Guardian’s Full Name Signature Date**