

KENT SCHOOL DISTRICT

EMERGENCY EARLY DISMISSAL PLAN / DISASTER PLAN

Dear Parent(s) or Guardian(s):

In the event of an unanticipated early dismissal due to inclement weather, power outage, or other emergency situation, it is important that you and your child(ren) have a plan of action. The plan CANNOT include the use of school phones as there may be instances where phone service is not available.

PLEASE COMPLETE AND SIGN A SEPARATE EMERGENCY EARLY DISMISSAL FORM FOR EACH CHILD IN YOUR FAMILY AND RETURN IT TO YOUR CHILD'S TEACHER IMMEDIATELY.

Student Last Name: _____ First Name: _____
Teacher's Name: _____
Address: _____
Mother's/Guardian's full name: _____
Phone (home): _____ Cell phone: _____ Phone (work): _____
Father's/Guardian's Full Name: _____
Phone (home): _____ Cell phone: _____ Phone (work): _____

In the event of an unanticipated early dismissal or disaster*:

1) My child is to be picked up by his/her regular daycare transportation. ____ Yes ____ No
Name of daycare: _____ Daycare phone: _____

In the event that regular daycare transportation is not available, please indicate which of the other options below are acceptable 2) ____ 3) ____ 4) ____ 5) ____ 6) ____

2) My child is to ride home on his/her regular bus. ____ Yes ____ No

3) My child is to walk home. ____ Yes ____ No

4) My child is to walk to _____ 's home.* ____ Yes ____ No
Address: _____

5) My child is to ride home with either of the following people:* ____ Yes ____ No
Name: _____ Phone: _____
Name: _____ Phone: _____

6) My child is to stay at school until his/her parent or guardian arrives. ____ Yes ____ No

If the options selected above are not possible due to the nature of the situation, your child will be kept at school until you or one of your child's emergency contacts arrive or until we make contact with you to make other arrangements.

I have reviewed this plan with my child.

Parent's Signature: _____ Date: _____

*Please confirm this plan with each person listed above prior to returning this form to the school.

To be completed ONLY in the event of an emergency by school staff.

The student was released to: _____
(Please print full name)

Signature of Pickup Person: _____

Staff member releasing child: _____ Time/Date: _____