

EARLY WORK RELEASE FORM

Rappahannock High School

2007-2008

This agreement certifies that your child, _____ has permission to leave Rappahannock High School to go to work on their authorized days of employment. It is imperative that you and your child's employer provide us with a legitimate signature at the bottom of this form.

If for any reason your child's employment status changes, we will need to be notified so that our records remain accurate. Also, if your child for some reason becomes unemployed, he/she will be required to remain at the high school in a study hall class until the end of the school day.

Your child's safety is important to us and we try with every effort to know where your child's location is throughout the end of each school day. Your child will be required to sign out in the office when leaving the building. Please advise your child to keep the front office abreast of any changes with their employment status.

Thank you.

Student's Name (Printed)

Student's Signature

Parent's Signature

Phone Number

Student's Employer's Signature

Student's Employer's Phone number

Authorized days and hours of employment:
