

Student Release/Runner Form

Student's Name (Last) _____ (First) _____
Teacher _____

Student Requested By _____

Reception/Reunion Area

Name on Emergency Form _____ Proof of ID: Y or N

Student Status (Completed By Teacher)

Absent _____ First Aid Station _____ Missing _____

For School Use Only

Student Name _____ Released To _____

Approved By _____ Signature _____

Date _____ Time _____ (AM) (PM) Destination _____

Phone Number ____ - ____ - ____ Requester Signature _____