



### STUDENT EMERGENCY RELEASE FORM – Secondary

FAMILY NAME

Student First Name:		Student Family Name:		Grade:
Parents/Legal Guardians	Name (print name)	Relationship to child	Phone number	
Parent/Guardian #1				
Parent/Guardian #2				

For the safety and well-being of students, the school may implement a "controlled release" in the event of an emergency, or disaster. **The school administrator may release the student if the situation is deemed to be safe and the student is considered not to be at risk.**

- If we are unable to reach the school, we authorize the release of our child, in his or her own care, providing the situation is deemed as safe and our child is considered not to be at risk.
- If we are unable to reach the school, we do not want our child released unless one of the adults authorized below is able to claim our child (medical or response personnel excepted).

Upon release, a record shall be kept of the temporary guardian's name, or of the fact the student was released into their own care; along with the date and time of their release, a contact phone number, and their expected destination(s).

*Alternate Guardian	Phone or Cell Number	Email	Guardian Informed and Agreed ( Yes or No)

\* If possible, list 2 household adults for maximum potential persons to pick up your child. **Remember** to include anyone that would normally pick up your child.

List any special instructions or individuals who MAY NOT claim your child: \_\_\_\_\_

Signatures: Parent/Guardian #1: \_\_\_\_\_ Parent/Guardian #2: \_\_\_\_\_

Dated: \_\_\_\_\_

**FOR SCHOOL USE ONLY – this section to be completed at time of release only (PLEASE PRINT CLEARLY)**

Student's Name:	Student's Phone or Cell Number:
Student was released: <input type="checkbox"/> Into student's own care:	First Destination (after release):
Or released to: _____ <small>(Alternate Guardian's name - PRINT)</small>	Final Destination (after release):
Alternate Guardian's Phone or Cell Number:	Date & Time of Release: _____ @ _____ AM PM
Release authorized by: _____ <small>(Staff member's name - PRINT)</small>	<b>X</b> _____ <small>(Student, Parent or Alternate Guardian's signature at time of release)</small>
Notes: _____	
_____	
_____	