

Student Tardy and Early Dismissal Form

Dillon County Technology Center

Dillon County Technology Center requires students to be accompanied by an adult 18 years of age or older with a valid state ID and listed on the form below when checking-in to or leaving early from school.

In an effort to better server the students enrolled in the center we are offering telephone sign-in for tardies and check-out for early dismissal. If you plan to use this service please complete the form below and provide the appropriate documentation.

____ YES I plan to participate in the telephone sign-in and check-out practice of the school.

____ NO I will physically bring my child when they are tardy and check them out when they must leave school early.

If you selected YES above please complete information below:

Parent/Guardian _____ DL No: _____
Please Print Name

Telephone check-in/out requires that the individual list above provide a copy of their Drivers Licenses or ID card issued by the state. The number will be the code used to check-in/out your child when necessary. By providing the above information you agree to the center terms.

We ask when you call-in for this process you must state your child's name as it appears on school records, your name as it appears on the DL/ID card, and the number on the card.

IF YOU SELECT YES ABOVE YOU MUST COME TO CENTER AND PROVIDE A COPY OF VALID ID TO COMPLETE THE TELEPHONE CHECKIN/OUT PROCESS.

Student Name: _____

Home High School: _____ Grade: _____

DCTC Class: _____ AM ____ PM ____

This information is required only if you desire your son/daughter to be checked out of school by someone other than a parent or legal guardians. This information must be completed and returned to the Center.

Parent/Guardian Name: _____

Home Telephone Number: _____ Cellular Number: _____

I, _____, am the parent/guardian of the above named student. The only person or people given permission to check my child out of school early is:

Name: _____

Relationship to student: _____ Phone Number: _____

Name: _____

Relationship to student: _____ Phone Number: _____

Parent/Guardian Signature Date

****NO MORE THAN TWO (2) PEOPLE, OTHER THAN PARENT(S) OR GUARDIAN, WILL BE ALLOWED TO SIGN YOUR CHILD IN/OUT OF SCHOOL.**