



**MARY SHOEMAKER SCHOOL  
A NOTE TO SCHOOL**

Student Name: \_\_\_\_\_

Teacher Name: \_\_\_\_\_

Date: \_\_\_\_\_ Phone: \_\_\_\_\_

**CHANGES TO NORMAL ROUTINE:**

- will be picked up early from school by:

\_\_\_\_\_

at \_\_\_\_\_ am/pm

- will be picked up at dismissal in carpool by:

\_\_\_\_\_

- will be going home as a walker (Please circle one that applies)

VIA East Millbrooke Ave

**OR**

VIA Woodstown High School/Middle School

- other \_\_\_\_\_

- SACC change
  - will be attending SACC
  - will not be attending SACC

**Parent Signature:** \_\_\_\_\_



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