

Title Student Schedules and Course Loads (Exhibit)  
Number IIE-EA  
Last Revised December 13, 2017

**HIGH SCHOOL RELEASE TIME FORM**

Student Name \_\_\_\_\_ Grade: 9 10 11 12

Student ID # \_\_\_\_\_ Campus: CVHS DRHS GHS HHS MHS GCA CVS

Your son/daughter has requested that he/she be granted release time during the school day for the **2020/2021** school year. **Release time is granted permission to leave campus for such activities as online classes, community college, work, etc. During release time, students are subject to discipline under the scope of the school’s authority (JIC-Student Conduct).**

Students are required to be enrolled in a minimum of five credit-bearing classes per semester. Classes must be taken consecutively. Indicate below the number of periods your student will be released each semester. Total cannot exceed three periods per semester.

\_\_\_ Number of release periods **first** semester/ \_\_\_ Number of release periods **second** semester

**Students must provide their own transportation to accommodate release times. Students who loiter on campus are subject to trespass and discipline in accordance with Gilbert Public Schools *Student Conduct Policies*.**

**Administrators reserve the right to revoke release time privileges at any time.**

\_\_\_\_\_  
Parent Name (Printed) Signature Date

\_\_\_\_\_  
Address City Zip Code

\_\_\_\_\_  
Home Phone Cell Phone Work Phone

\_\_\_\_\_  
Student Signature Date