

STUDENT CUSTODY RELEASE FORM

I have accepted custody of _____,
(student name)

a student in the Stevenson-Carson School District, on _____ 20____
(date)

at _____ m.
(time)

Signed _____

Name _____

Address _____

FOR DISTRICT USE ONLY

Please check the appropriate boxes to indicate what steps have been taken.

Notification or written permission of person with custody

Permission verified by district

Warrant

Emergency

Nature of emergency: _____

Identification of person seeking custody verified

Identification _____