

Period: \_\_\_\_\_ Room: \_\_\_\_\_  
Teacher: \_\_\_\_\_

## Hall Pass

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

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

\_\_\_\_ To Main Office  
\_\_\_\_ To Class

☐ Now

☐ Before school/between classes/after school

☐ Other \_\_\_\_\_

Staff Name: \_\_\_\_\_

Staff Signature: \_\_\_\_\_

Period: \_\_\_\_\_ Room: \_\_\_\_\_

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

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