



Request for Approved Absence

Please submit this form no later than **1 week** in advance of the anticipated absence for consideration. Requests received within less than one week notice are subject to not being approved.

Student Name: _____ Date: _____

Student Grade Level: _____ Homeroom Teacher: _____

Date(s) of Anticipated Absence: _____

Has the Homeroom teacher been notified? YES No

Please describe the educational benefit for the trip or activity.

I understand that my student is responsible for completing all work assigned during his/her absence from school and that it is my responsibility to arrange this work with my child's teacher(s). I also understand that upon returning to school, my child will be required to present to the class and/or Principal what he/she learned as a result of the absence in order for the absence to be excused.

- **Please note - You will only be contacted by the front office if the absence will NOT be excused.**

Parent Signature

Date

Email address _____

Office Use Only

Date Received: _____ By: _____

_____ Excused _____ Unexcused Principal Signature _____