

## PLANNED ABSENCE FORM

**Any absence** from school places a considerable burden on both the student and the teachers. The school strongly discourages any absence for other than emergency medical reasons! The parents and student need to fully understand that make-up / contracted work must be completed and submitted on the day of return to school from the planned absence, unless the teacher grants additional time to complete the work.

**PARENT**

Student's name: \_\_\_\_\_ Grade: \_\_\_\_\_

Dates of **absence** From: \_\_\_\_\_ To: \_\_\_\_\_

Specific reason for **absence**: \_\_\_\_\_

**Parent signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**STUDENT**

This form must be presented to each of your teachers for information regarding your class.

**TEACHER**

Please initial and note assignments due, exams, projects and include appropriate comments regarding student's status in your class.

Period	Teacher Initial	Assignment / Comment
A		
B		
C		
D		
E		
F		
G		
H		

**Principals Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_