



Pre-Arranged Personal Absence Request

Student Name _____ Grade _____

Home Phone _____ Dates of Absence _____

Reasons for Absence _____

Parent/Guardian Signature _____ Date _____

Students must have this form signed by ALL of their teachers and by their parent/guardian and an administrator for any planned absence of a week or more. Return this signed form to the school office.

Teachers, please check the appropriate column:
 Column 1: Class work can be given prior to the student's departure.
 Column 2: Class work will be allowed to be made up. Please indicate a due date in comments section.
 Column 3: The classroom experience cannot be repeated, i.e. simulations, discussions, field trips.
 Column 4: Strongly recommend your child be present. This student cannot afford the lost time.

Class	Teacher's signature/Comments	1	2	3	4
Reading					
Spelling					
Computers					
Language Arts					
Math					
Phy. Ed.					
Social Studies					
Science					
Art					
Music					
Religion					
Spanish					

Families should carefully evaluate taking students out of school. While a pre-planned absence may provide an excellent learning experience, an absence from school may create learning problems for your students. Please consider the above comments before signing this form. Remember the responsibility to make up class work rests with the students. This form must be completed by all parties involved and returned to school at least a week prior to the anticipated absence.

Any questions concerning this form should be directed to the school office.

Administrator's Signature: _____ Date _____