|  |  |
| --- | --- |
| **SCHOOL NAME**ADDRESSAttendance Office: NUMBERFAX: NUMBER | **Student Name:** **Student ID #:** **Grade:**  |

**Secondary Prearranged Absence Form**

Families should not schedule vacations or travel while school is in session. If a family vacation or travel must occur while school is in session, it must be prearranged prior to the first date of the absence and approved by the principal (or designee).

Pursuant to district Procedure 3122P, the principal (or designee) may excuse up to five (5) school days for a prearranged absence per student each school year.

Assignments requested for a prearranged absence will be provided to the student or parent/guardian if requested five (5) school days prior to the absence. **Please note:** Not all learning activities/opportunities can be reproduced outside of the classroom.

**STUDENTS**

1. PLAN AHEAD! Obtain prearranged absence form.

2. Bring to each teacher for a signature and consequential comments.

3. Upon review of “teacher comments” – parent/guardian signature is required.

4. Administrator signature is required before returning form to the attendance office.

5. Return completed form to the attendance office prior to the absence.

Reason for absence:

Date(s): Time/Period:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Period** | **Subject/Class** | **Comments** | **Requested Assignment(s)** | **Teacher Signature** |
| 0 |  |  |  |  |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |

**PARENTS**

I have reviewed the teachers’ comments and understand the possible academic implications of my son’s/daughter’s absence from school on the date(s) indicated above.

|  |  |  |
| --- | --- | --- |
|  Parent/guardian signature |  Date |  Phone |
|  Administrator signature |  Date |  Number of days excused |

\*\*\*\*OFFICE USE ONLY\*\*\*\*

Verified by: Date:

 ❑ Phone/Fax ❑ In person ❑ Email