PRE-ARRANGED ABSENCE REQUEST

STUDENT: ___________________________ DATE RECEIVED (by office): ______________

This form is available for parents and students to request prior approval for a planned absence. While we discourage missing class, it is understandable that some family situations may require it. Check the student handbook to make sure the reason for your absence is likely to be excused. No planned absence should cause a serious detrimental effect upon academic progress.

Have your parent/guardian complete the required information first. Then have each teacher sign the form, including current grade percentage and comments about academic progress. Turn it into the attendance office 48 HOURS before your planned absence.

Date(s) ______________ and reason for absence(s) ______________________________________

Parent Signature: __________________________________________ Best Phone:(H) __________

Period 0 Teacher Comments: _______________________________________________________
Current Grade Percentage: _______ Teacher Signature: ________________________________

Period 1 Teacher Comments: _______________________________________________________
Current Grade Percentage: _______ Teacher Signature: ________________________________

Period 2 Teacher Comments: _______________________________________________________
Current Grade Percentage: _______ Teacher Signature: ________________________________

Period 3 Teacher Comments: _______________________________________________________
Current Grade Percentage: _______ Teacher Signature: ________________________________

Period 4 Teacher Comments: _______________________________________________________
Current Grade Percentage: _______ Teacher Signature: ________________________________

Period 5 Teacher Comments: _______________________________________________________
Current Grade Percentage: _______ Teacher Signature: ________________________________

Period 6 Teacher Comments: _______________________________________________________
Current Grade Percentage: _______ Teacher Signature: ________________________________

Period 7 Teacher Comments: _______________________________________________________
Current Grade Percentage: _______ Teacher Signature: ________________________________

Administrator Approval: Yes ________ No ________________

Comments: ______________________________________________________________________

Signature: __________________________________________ Date Received: ______________