



Lower School and Early Middle School Request for Prearranged Absence

Note: This form is unnecessary for emergencies or school-related events (e.g. music, sports, etc.).

Parents should understand that extended absences could impact their child's success in school. Please fill out this form if your child will be missing more than two consecutive days for a reason other than illness or injury. This form must be completed and submitted at least one week (five school days) prior to the absence.

Student Name _____ Grade _____ Teacher _____

Parent/Guardian Name(s) _____

Date(s) to be missed _____

Reason for absence (include reason this must be taken outside of scheduled school vacations/breaks):

Please submit this form to your child's classroom teacher when complete.

For Office Use

Form received on: _____ Approved Not Approved

Division Head Signature _____

Copies given to:

Classroom Teacher Math Teacher (if different) Attendance Coordinator Parent