



Submit to the office **at least one week prior** to the requested absence dates

We recognize there are many reasons why a family may choose to take their student out of school; however, students cannot maximize their educational experience when they are absent. A significant amount of teaching and learning takes place during class time and can not be duplicated at home. Family vacations **must** be pre-arranged in order to be considered excused. The pre-arranged absence form must be completed at least one week prior to the absence. Failure to follow the procedures will result in the absence being reported as unexcused.
-Family Vacation Policy

Student Name(s)	Teacher	Grade
_____	_____	_____
_____	_____	_____
_____	_____	_____

Beginning Date of Absence: _____ Date Student Will Return: _____

Reason for Absence:

I have read the policy above and I understand my child will miss _____ days of classroom instruction. I am aware that by missing this many school days, my child may:

- miss newly introduced concepts and skills in reading, writing, math, social studies, and science
- miss activities, projects and classroom events that cannot be made up
- need extra support at home with assignments upon returning from the absence
- need to relearn established or learn new classroom policies and procedures
- not be provided assignment in advance of their absence
- make up assignments/projects as decided by the classroom teacher upon return

It is the family's responsibility to contact the teacher(s) about the assignments upon returning. All assignments that are assigned must be completed and turned in upon students return.

Parent Signature: _____ Date: _____

Reminder: According to district policy your child is automatically un-enrolled from Lakeview after 20 consecutive school days missed and needs to be re-enrolled upon your return. We make every effort to place your child back in the same classroom, but this cannot be guaranteed. Extended absence does have ramifications for students here on variances as well as those who attend special programs.

Principal Signature: _____ Date: _____