

# John P. Stevens High School



## Request for Excused Absence for a Religious Holiday

Student Name: \_\_\_\_\_

Student Grade/Section: \_\_\_\_\_ Student ID # \_\_\_\_\_

Requested Date(s) for Excused Holiday: \_\_\_\_\_

Name of Religious Holiday: \_\_\_\_\_

Faith (of which you are a member) Celebrating Holiday: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date of Application: \_\_\_\_\_



Contact Numbers \_\_\_\_\_

**Note: This application MUST be submitted in accordance with provisions outlined in the Student/Parent Handbook\*. This application must be turned in to the Attendance Office 72 hours before the holiday is observed. Failure to do so will result in a charged absence. If the request is denied, your child will be notified within 24 hours of receipt of this application. \*Parent/Guardian MUST call the Attendance Office @ 732-452-2807 to give verbal confirmation prior to the observation.**



Date Application Received: \_\_\_\_\_ Received By: \_\_\_\_\_

Approved By/Date: \_\_\_\_\_ Denied By/Date: \_\_\_\_\_



From: JPS Attendance Date: \_\_\_\_\_

To: \_\_\_\_\_ Homeroom: \_\_\_\_\_

Your request for a religious holiday has been denied for the following reason(s):

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