

Veterans Memorial HS

STEP 1: Submit via e-mail 72hrs prior to school function (not including weekend/holiday) to Ms. Soto; cc Lourdes Collaso and Maribel Escalera

*****Be sure to filter students names alphabetically**

*****Student ID number must be provided*****

STEP 2: Submit to attendance clerk **within 24 hours after the school function.**

Teacher Name: _____ **Be sure to mark students present/absent.**

Activity: _____

Date of Activity: _____

Periods (the students will be out of class): _____

Alphabetically

| | ID Number | Last Name | First Name | Present | Absent |
|---------|-----------|-----------|------------|---------|--------|
| Example | 11225588 | Rodriguez | Danielson | X | |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |
| 8 | | | | | |
| 9 | | | | | |
| 10 | | | | | |
| 11 | | | | | |
| 12 | | | | | |
| 13 | | | | | |
| 14 | | | | | |
| 15 | | | | | |
| 16 | | | | | |
| 17 | | | | | |
| 18 | | | | | |
| 19 | | | | | |
| 20 | | | | | |
| 21 | | | | | |
| 22 | | | | | |
| 23 | | | | | |
| 24 | | | | | |
| 25 | | | | | |
| 26 | | | | | |
| 27 | | | | | |
| 28 | | | | | |
| 29 | | | | | |
| 30 | | | | | |

Submit to attendance clerk within 24 hours after the school function.

Teacher Signature: _____

Attendance Clerk Signature: _____

Date turned in: _____