

**OCEAN LAKES HIGH SCHOOL  
PRE-APPROVED ABSENCE REQUEST FORM**

Student's Name:

Grade:

Requested Dates of Absence(s):

Reason for Absence:

Parent/Guardian Signature to Verify Note:

Please have all of your teacher's initial below and return this form to the Attendance Secretary. *Remember you will still be responsible for making up all missed work.*

1. Request should be submitted at least a week prior of requested day(s).
  2. Parent signature on form along with a note requesting the day(s) off.
  3. Signatures from all teachers
- You are reminded that the day(s) you have requested will count toward your 6-day absence limit for the semester. *The specific reason for your absence will determine whether the absence will be waived should you require an Attendance Waiver at the end of the semester.*

Block 1	Block 2	Block 3	Block 4
A	A	A	A
B	B	B	B

**Based on your attendance, discipline, and grades the absence you requested is:**

**Recommended / Not Recommended**

Administrative Signature:

Attendance Secretary:

***A copy will be returned to student when decision is made by Administrator.***

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**Office Use Only:**

Date Received

Discipline Record

Attendance Record

Progress Report/Report Card Grades