

AVELLA AREA SCHOOL DISTRICT

SPECIAL ABSENCE – VACATION FORM

I request my son/daughter to be excused from school on _____ through _____.

Destination and reason for absence:

1. Destination: _____
 2. Objective: _____
- _____

Students may be released from school upon the written request of a parent or guardian provided certain conditions of the school district policy are met: The days missed must be educational, approval of the building principal must be secured prior to the trip, tour, or vacation, and ***your child/ren are to keep a log/journal of his/her daily activities. The student will be required to submit the journal to the Office of the Principal within five (5) days of his/her return in order for these days to be excused.***

This form must be completed prior to your child's absence. The number of Special Absence days will not exceed five (5) per school year. He/She will be required to make up all assigned work. Return this form to the Office of the Principal. Upon the Principal's approval, a copy will be returned to you.

Parent/Guardian Signature

Date

Name of Student

Teacher's Name

- Approved
- Not Approved

Current attendance _____
(Number of days absent)

Principal's Signature

Date

Email Document For Approval: