



## Eatonville School District #404

PO Box 698, 200 Lynch St. W. Eatonville, WA 98328

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*Together, We Commit to Inspiring Life Long Learners, To Create a Better Future*

### PLANNED ABSENCE FORM

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

Dates of absence: \_\_\_\_\_

Reason for absence: \_\_\_\_\_

I understand the following:

- Planned Absence form must be signed by parent and student.
- Upon return, student is responsible for completing all missed assignments and tests. Excessive absences may affect student's final grade.
- This form must be returned to Attendance Secretary prior to absence.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Official: \_\_\_\_\_ Date: \_\_\_\_\_

Period	Class	Current Grade	Assignments	Teacher Signature
1				
2				
3				
4				
5				
6				
7				