



# PLANNED ABSENCE REQUEST

Date of Request: \_\_\_\_\_ Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

My child will be absent from \_\_\_\_\_ through \_\_\_\_\_  
(date) (date)

Specify reason for absence:  
\_\_\_\_\_

If absent due to vacation or leaving the country, please specify location: \_\_\_\_\_

**To the Student / Parent(s):** Regular school attendance is an important ingredient in students' academic success. Instructional hours missed due to a planned absence **are unexcused absences and will be calculated** in attendance thresholds described below (see attendance definitions). Once one of the attendance thresholds for "Habitual Truant" is met, **your child will be referred to your building's absence intervention team** to develop an Attendance Intervention Plan.

It is your responsibility to have all HOMEWORK ASSIGNMENTS COMPLETED upon YOUR RETURN to school after a planned absence. Contact your teacher(s) about how/ when to complete missed assessments.

### **ATTENDANCE DEFINITIONS:**

#### **Habitual truant:**

- a. Absent 30 or more consecutive unexcused hours
- b. Absent 42 or more unexcused hours in one school month
- c. Absent 72 or more unexcused hours in one school year

#### **Excessive absences:**

- a. Absent 38 or more hours in one school month with or without a legitimate excuse;
- b. Absent 65 or more hours in one school year with or without a legitimate excuse.

**To the Teachers:** Your signature indicates knowledge of this student's planned absence. The student / parent has the responsibility to obtain assignments and schedule missed tests. If the student's achievement would be seriously impaired by this absence, please note below. Please sign under each subject and list **ASSIGNMENTS** provided during absence:

Subject Area/Course	Teacher Signature	Teacher Comments
Language Arts		
Math		
Science		
Social Studies		
Other:		
Other:		
Other:		

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

Date: \_\_\_\_\_

**PLEASE RETURN THIS FORM TO THE MAIN OFFICE**

**FOR OFFICE USE ONLY:**

Date Received: \_\_\_\_\_ Principal Signature: \_\_\_\_\_

Absence request:

\_\_\_\_ Approved

- Due date for all completed work to be submitted for grading \_\_\_\_\_
- Absence to be: \_\_\_\_\_ excused \_\_\_\_\_ unexcused
- Hours absent: \_\_\_\_\_

\_\_\_\_ Denied based on (check all that apply)

- [ ] length of absence, [excessive quantity of instructional work missed
- [ ] timing of absence in school year
- [ ] existing academic or attendance concerns
- [ ] timing of State testing window
- [ ] other individualized circumstances