Planned Absence Request

Student Name:	Gr	rade:	_ Current Date:	
Please note this form the absences to be ex	must be submitted to the sch	ool prior to th	ne planned absence to b	e considered for
the absences to be ex	ouseu.			
Note on Missed Worl	c and Assessments			
teachers can invest th planned absences. Aı	can not be replicated during neir time in classroom instruct ny assessments missed during	tion, we do no g a planned al	et provide work for stude osence of more than five	ents during
made up with the stu	dent to ensure teachers can n	naintain class	room pacing.	
Date(s) of Requested	Excused Absence:			
I request that my chil	d be excused from school on	the dates spe	cified above for the follo	owing reasons(s):
	completed by the teacher and			
Is it likely that this stuand achievement? Ye	ident's absence as requested es No	will have an a	adverse effect on the stu	ıdent's progress
Teacher Signature:		Principal Sign	nature:	
	bsence does not meet crit (Unexcused)	teria for excus	sed absence	