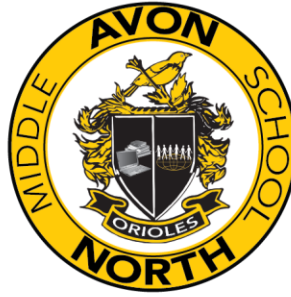


Principal
Michael McKinney
Assistant Principals
Ginger Davis • Ranisha Lee



1251 N. Dan Jones Road
Avon, IN 46123
p: (317) 544-5500
f: (317) 544-5501
amsnorth.avon-schools.org

Today's Date: _____

Student's Name: _____

I am requesting that my child be allowed a pre-arranged absence on the following date(s):
_____, for the purpose of: _____

Pre-Arranged absences will not be approved during the following circumstances:

- 1. NWEA or ILEARN testing**
- 2. Last 4 days of semester**
- 3. When requested absence would move the student into excessive absences status or student has surpassed the allowable number of absences.**

I am making this request at least five (5) school days in advance of the absence. I understand that no more than three (3) school days may be pre-arranged per school year.

Parent Signature

Office use only:
Date received: _____

____ Approved
____ Denied

Reason: _____

Administrator Signature

Note: Absences which occur that do not meet the guidelines of the corporation's attendance or pre-arranged policies will be considered unexcused.

