



Parkway School

160 Parkway School Drive

Boone, NC 28607

Phone: 828-264-3032

Fax: 828-264-7999

REQUEST FOR FAMILY TRAVEL/EDUCATIONAL OPPORTUNITY APPROVAL

To be approved as an excused absence, a trip must be educational in nature. Please detail on this form how the trip will be educational and especially how it might relate to topics studied in your child's class.

A limit of TEN (10) school days can be excused for the purpose of educational travel in one school year.

Student Name: _____ Grade/Homeroom Teacher: _____

Date(s) of Requested Absence(s): _____ to _____

Nature of Absence(s): _____

Educational Value of Absence(s): _____

- 1. This form should be submitted at least seven (7) days prior to the start of the trip. It is recommended that this form be submitted as early as possible so that it can be processed prior to the absence.**
2. A student's absence history and academic history will be considered and administrator/teacher's discretion will be used to determine the impact of the student's educational progress.
3. All missed student work must be completed and returned to the teacher(s) *within one week* following student's return to school. If possible, work with the teacher(s) to get the assignments ahead of the planned trip.

*If all of the above conditions are completed within the required time, the absences will be coded as "educational opportunity." However, if all conditions are not met, the absences will not be excused. Any absences exceeding the TEN (10) day limit will NOT be excused.

After review by all of the student's teachers and principal, a form will be sent home to the parent. The form will have specific instructions as to how the absences(s) will be coded (excused/unexcused) and will give instructions on make-up.

Parent Signature: _____ Date: _____

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OFFICE USE ONLY:

Teacher Signature: _____ Date: _____ Approved Discouraged

Comments: (If discouraged, give reasons.) _____

Teacher Signature: _____ Date: _____ Approved Discouraged

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Comments: (If discouraged, give reasons.) _____

Teacher Signature: _____ Date: _____ Approved Discouraged

Comments: (If discouraged, give reasons.) _____

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Student's Current Attendance: _____ total *excused* absences _____ total *unexcused* absences

Principal Signature: _____ Date: _____ Approved Denied

Comments: (If denied, give reasons.) _____

