

HUDSON MIDDLE SCHOOL
ADVANCED ABSENCE NOTICE

STUDENT _____ **Grade** _____ **ID #** _____

PARENT SIGNATURE _____

Dates student will be absent from class: _____

Reason for the absence: _____

Absence from the classroom presents a major obstacle to effective student learning. When students are absent, they miss not only the information given, but also the interaction, which adds to the overall learning experience. The activities, which occur in a classroom, can never be totally replicated in "make-up work". Having the student in class on a regular basis is imperative if teachers and schools are to be held accountable for the end result.

The student has made the proper arrangements with the following teachers for the completion of work missed and set a due date on which the work will be handed in.

It is mutually understood that the **sole** responsibility for the completion of the Advance Absence Notice and the makeup of classroom work belongs to the **student**.

<u>Period</u>	<u>Subject</u>	<u>Make-Up Date</u>	<u>Teacher's Signature</u>
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____
7	_____	_____	_____
8	_____	_____	_____

Student Signature _____
(I understand what I have signed and agree to fulfill my responsibility.)

Attendance Secretary _____