

*This form will need to be completed only if your child will be out of school for three (3) or more consecutive days. Complete the top portion, have your child take it to each of their teachers for signature, then return it to the office for final approval. This form needs to be completed the week ahead of time in case a teacher requires assignments to be turned in prior to you leaving. If your child is only going to be gone two (2) or fewer days, call or send a note to the office, and have your child request homework AHEAD OF TIME!

BLUFFTON EXEMPTED VILLAGE SCHOOL VACATION REQUEST FORM

We are requesting vacation leave for our child _____.
(Print Student's Name)

We intend to be on vacation from _____ to _____ and student will return to school on _____.

We understand that it is our child's responsibility to obtain, complete, and return all work which may be assigned ahead of time or while we are away. Tests are to be completed within a reasonable amount of time upon return. Teachers *are not required* to make extensive assignments or pursue their completion when students go on vacation.

Vacations that fall during the last week of any semester may not be approved.

PARENTS SIGNATURE: _____

DATE OF REQUEST: _____

Teachers: Please acknowledge the above absence by checking and initialing below. Assignments may be given when feasible and at your discretion. Although a student is not in good academic standing, vacation leave may still be approved by the office.

| | <i>IN GOOD STANDING</i> | <i>IN POOR STANDING</i> | <i>TEACHERS COMMENTS</i> | <i>INITIALS</i> |
|------------------------|-----------------------------|-----------------------------|--------------------------|-----------------|
| 1 ST PERIOD | | | | |
| 2 ND PERIOD | | | | |
| 3 RD PERIOD | | | | |
| 4 TH PERIOD | | | | |
| 5 TH PERIOD | | | | |
| 6 TH PERIOD | | | | |
| 7 TH PERIOD | | | | |
| 8 TH PERIOD | | | | |

OFFICE SIGNATURE: _____