

Planned Absence Teacher Notification Form

Student Name: _____

Date(s) of Absence: _____

Reason for Absence: _____

I am notifying my teachers that I will be absent on the above dates and acknowledge that I am responsible for all work that I miss. I am asking my teachers to please sign this form recognizing that I spoke with you.

Teacher Signature

Date

Period 1: _____

Period 2: _____

Period 3: _____

Period 4: _____

Period 5: _____

Period 6: _____

Period 7: _____

Period 8: _____

Parent signature: _____

Student signature: _____

Place the completed form in the bin in the Academic Affairs Office at least one day prior to the planned absence.