



# Canal Winchester Local Schools

## VACATION REQUEST

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Date(s) of Vacation: _____
First day of school student will miss: _____
Date student will be returning to school: _____
Vacation Destination: _____

\_\_\_\_\_  
Please print Parent/Guardian Name

\_\_\_\_\_  
Parent/Guardian Signature

**It is the responsibility of the parent/guardian to complete the vacation form at least one (1) week prior to leaving. For more information on Vacation Procedures see the Student Handbook.**

School Work Responsibility: Being a responsible learner means if you are absent for an extended time due to a prearranged vacation you must check PowerSchool and Canvas/Google Classroom for any work that may be posted. Students are expected to return with all assignments completed while absent upon their return date to school unless arrangements with the specific teacher have been made.

**Please list all of your teachers below:**

_____	_____
_____	_____
_____	_____
_____	_____

**TEACHERS:** Please give student makeup work prior to the first day of vacation.

OFFICE USE ONLY:

Date turned in to office: \_\_\_\_\_

Days absence YTD: \_\_\_\_\_

ADMINISTRATION APPROVAL: \_\_\_\_\_