HILLCREST PRIMARY/LEADS CHARTER SCHOOL
ATTENDANCE AGREEMENT

We are committed to doing everything we can to improve our students' attendance as research shows the negative effects that truancy has on academic performance. Communicating clearly with parents is a significant part of our plan to support the whole child and this agreement is part of that effort.

PLEASE READ AND INITIAL EACH LINE.

EXCUSING ABSENCES

_____ I understand that I need to call Hillcrest Primary School on the morning of the absence to excuse my child at 715-524-2134. This is a safety procedure the school follows to ensure every child is accounted for.

_____ I understand that if I have not called by 9:00 a.m, the school's automated system will be calling me to check on the welfare of my child.

_____ I understand that for planned absences such as vacations, doctor appointments, etc., advance notice should be given in order for teachers to prepare. When a planned absence is approaching, please call 715-524-2134 or stop in the office to pick up the pre-planned absence form. In addition, please contact your child's teacher for any homework will need to be completed.

_____ I understand that arriving late/tardy, leaving early, etc. is considered to be "part of a day", and will count toward the semester total of absences. Providing a doctor's note will excuse a child without counting against truancy. Hillcrest fax number is 715-524-1151.

UNEXCUSED ATTENDANCE AND THE LAW

_____ I understand that missing 5 or more days, parts of days, that includes being tardy/late, during a semester will result in a notification being sent home. A copy of this letter may also be sent to the Shawano School District Police Liaison.

_____ I understand that if my child misses 10 days, or parts of days, that includes being tardy/late, during the school year, the school will request a parent meeting to address the truancy circumstances. A copy of this letter may also be sent to the Shawano School District Police Liaison.

_____ I understand that if my child misses more than 10 days, or parts of days, during the school Wisconsin state law requires the school to report my child as "Habitually Truant". A copy of this letter may also be sent to Shawano County Human Services and the Shawano School District Police Liaison.

_____ I understand that if my child is "Habitually Truant", I may be fined $100.00 - $177.00.

_____ _____

Please print student's name | Teacher Signature

_____

Parent Signature

By signing your name you are acknowledging that you have received and read this notification.

PLEASE RETURN THIS FORM TO THE HILLCREST SCHOOL OFFICE BY SEPTEMBER 15, 2021

This form is intended to clear up any confusion regarding the law and attendance procedures. If you wish to discuss this further, please contact Mr. Brian Morstad at 715-524-2134, ext. 8501. Thank you for your cooperation.