MERCER AREA ELEMENTARY SCHOOL

301 Lamor Road
Mercer, PA 16137
Phone: 724-662-5102
Fax: 724-662-5103

The Leaders of Tomorrow are Learning Here Today

Mr. Gregory R. Acre
Principal
gacre@mercer.k12.pa.us
Ext. 3010

Mrs. Kristen Sansone
Dean of Students
ksansone@mercer.k12.pa.us
Ext. 3011

Mrs. Allyson Rust
School Counselor
arust@mercer.k12.pa.us
Ext. 3020

RE: ABSENCE FROM SCHOOL FOR EDUCATIONAL PURPOSES

Mercer Area Schools discourage extended absences from school for vacation trips, however, it is realized that some trips can be very educational.

The School District is now permitted by state law to grant excused absence from school for educational trips. It would be very difficult to set hard and fast guidelines that could cover every possible type of trip. We therefore ask that you briefly describe the planned trip on the bottom section of this letter and submit it to the school office for approval **TWO WEEKS PRIOR TO THE DEPARTURE DATE. Trips scheduled during testing will be considered unexcused. We would appreciate your consideration in not scheduling trips during our testing schedule listed below:**

TEST DATES:

- **PSSA English/Language Arts (Grades 3-6) April 26 - 30, 2027**
- **PSSA Mathematics, Science, and Make Ups (Grades 3-6) May 3-7, 2027**

PLEASE COMPLETE AND RETURN THIS FORM TO THE SCHOOL OFFICE

Date of Request: _____

Student's Name: _____**Grade/Teacher:** _____

Trip Destination: _____

Purpose of Trip: _____

_____

School Days Absent: (Please list only dates absent from school)

_____ _____ _____ _____ _____ _____ _____ _____

The student will be responsible for completing any and all work as directed by the child's teacher.
I certify that all of the information stated above is true. I believe that the trip has sufficient educational value to warrant my child's absence from school.

Parent/Guardian's Signature_____

SCHOOL USE ONLY

Requested Trip – Excused: _____

Requested Trip – Unexcused: _____

Student's Prior Absences – Excused: _____

Student's Prior Absences – Excused Trip: _____

Student's Prior Absences – Unexcused: _____

Principal Signature: _____ **Date:** _____