

PALMERTON AREA HIGH SCHOOL
FAMILY TRIP APPROVAL

NAME OF STUDENT _____

DATE(S) OF ABSENCE _____

DESTINATION _____

PARENT SIGNATURE _____

I understand that my child is responsible to make up all work missed during this absence period. It is his/her responsibility to contact the teacher to arrange for assignments.

I further affirm that this request for an excused absence from school is for the purpose of providing a new educational experience for my child.

THIS FORM MUST BE RETURNED TO THE HIGH SCHOOL OFFICE BEFORE THE DATE OF THE TRIP. IF THE FORM IS NOT RETURNED, THE ABSENCES WILL BE UNLAWFUL/UNEXCUSED AND THE PARENTS/GUARDIANS AND STUDENTS MAY BE SUBJECT TO FINES.

ALSO, IF THE FORM IS NOT RETURNED PRIOR TO THE ABSENCE, STUDENTS WILL RECEIVE ZEROS FOR WORK MISSED DURING THEIR ABSENCE.

SCHOOL APPROVAL:

PRINCIPAL _____

DATE _____

TEACHER APPROVAL:

BLOCK 1-TEACHER SIGNATURE: _____

Comments _____

BLOCK 2-TEACHER SIGNATURE: _____

Comments _____

BLOCK 3-TEACHER SIGNATURE: _____

Comments _____

BLOCK 4-TEACHER SIGNATURE: _____

Comments _____

**PLEASE RETURN THIS FORM TO THE HIGH SCHOOL OFFICE WHEN COMPLETED
(BEFORE THE TRIP).**