



MOON AREA MIDDLE SCHOOL VACATION REQUEST FORM

USED ONLY IF STUDENT IS MISSING 3 OR MORE DAYS OF SCHOOL

Student's Name _____ Grade _____

Leave Begins _____ Leave Ends _____ Return to School _____
Month/Day/Year Last day of leave Month/Day/Year Month/Day/Year

This is a request for Excused Leave for my child for the following reason: _____

Parent's Signature _____

_____ Date

Status of Student in all Subjects (FILLED OUT BY ALL STUDENT'S TEACHERS)

Teacher	Subject	Days Absent	Comments
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Excused Time Requires **ALL SCHOOL WORK TO BE COMPLETED** upon return to school. Work not complete will be evaluated as 0%.

All School work must be complete to include: Assignments, exams, mid-terms, and Final exams. Compliance with this is the Responsibility of **Both** Parents and Students. Please refer to the student handbook.

Once completed please turn into Mrs. Skwortz in the attendance office.