PRE-APPROVED ABSENCE REQUEST (please print or type)

Note: Have you considered requesting Remote Learning for this period? Click HERE for more detail.

Student's Legal Name: _____ Grade: _____

Teacher: _____ Student FCS ID Number (lunch number): _____

Requested Absence date(s): _____

Reason: _____

Parent/Guardian Name: _____

Parent/Guardian Email: _____

Parent/Guardian Phone Number: _____ Date: _____

Parent/Guardian Signature: _____

It is the responsibility of the student and/or parent/guardian to complete this form and return it to the school's designee 5 days in advance of the requested absence. Pre-approved absences must be approved by the Principal or Assistant Principal. Before approving the request, school administration will consider the student's complete attendance record including excused, unexcused, disciplinary, or other absence types. The school administration will also consider the student's academic standing before approving these absences. Please refer to Fulton County Board Policies "JB Attendance," "JBD Absences and Excuses," and the Medlock Bridge Parent Handbook for further information regarding attendance.

FOR TEACHER USE ONLY (teacher completes and submits to front office)
Current Academic Standing (indicate one):

☐ No Concerns ☐ Academic Concerns Regarding this absence (please specify): _____

_____

FRONT OFFICE USE ONLY: Attendance to date: Excused: _____ Unexcused: _____ PR: _____

ADMIN Approved: ____ Principal/Assistant Principal Signature:_____ Date:_____

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