



PLANNED ABSENCE / VACATION REQUEST FORM

Return this signed form to the **Attendance/Main Office** at least three (3) days prior to the vacation.

STUDENT INFORMATION:

Student Name: _____ Grade: _____

Date(s) of Absence: _____ Date of Return to School: _____

Reason for Absence: _____

! Attendance Policy on Vacation Absences

In accordance with Ohio House Bill 96, the District recognizes that all absences, whether excused or unexcused, reduce instructional time and may impact student learning. Ohio law requires school districts to implement attendance policies and interventions to address chronic absenteeism, defined as 10% of instructional time (approximately 90 hours). All absences count toward a student's attendance record and may impact academic progress, course credit, truancy requirements, and extracurricular participation.

While vacations are discouraged during school days due to lost instructional time, the school may excuse **up to five (5) vacation days per year with prior approval**. Students on vacation will be marked absent with parental permission, but this does not guarantee the absences will be excused. All missed work must be completed promptly, without placing an undue burden on teachers. If needed, families are responsible for arranging tutoring, and teachers may assign additional work upon return.

Teacher Acknowledgment *(indicates assignments discussed/given)*

Period	Subject	Teacher Name	Teacher Initials
1			
2			
3			
4			
5			
6			
7			
8			
9			



Parent/Guardian Acknowledgment

I understand the vacation attendance policy and the requirements of Ohio House Bill 96. I accept responsibility for assisting with making up missed work and understand that only five (5) vacation days may be excused with prior notice and proper documentation.

Parent/Guardian Signature: _____ Date: _____

***OFFICE USE ONLY — Administrator Approval** ☐ Approved ☐ Not Approved

Comments: _____

Administrator Signature: _____ Date: _____