PENNRIDGE SOUTH MIDDLE SCHOOL
REQUEST TO BE ABSENT FROM SCHOOL
DATE _____

I hereby request that my child _____Grade_____,
be permitted to be absent from _____(date) to_____, total of
_____school days. My child will return to school on _____.
I believe my child should be absent from school for the following reason:
_____.

SPECIAL NOTE TO PARENTS AND STUDENTS: In order to gather assignments, it will be the responsibility of the student to contact all his/her teachers before he/she absents himself/herself from school. Upon return to school, the student must submit all work requested by teachers during his/her absence. It should be further understood that the student's teachers are not obligated to stay additional afternoons to tutor the student in the studies missed.

The students should complete the listing of subjects and teachers below. **Please present this form to your teachers no more than one week in advance of your trip**. It will be the responsibility of the student to have all his/her teachers sign this form. **Once the form is complete, please return to the main office BEFORE leaving for your trip.**

We have read this, we understand it, and will comply with it.

_____ _____
Parent's Signature Student's Signature

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