Note: If your student will be absent two or more days, you must submit this form to the office at least three (3) school days before the start of the planned absence. If the reason for absence is different for multiple siblings, please complete a separate form for each student.

Student Name: ____________________________ Teacher/Room #: __________________________

Student Name: ____________________________ Teacher/Room #: __________________________

Dates of Absences: ________________________________________________________________

Reason for Absence: (Please check one)

Family Vacation:  Family vacations are NOT excused. Students will be marked unexcused vacation for the duration of the vacation.

I understand that this is an UNEXCUSED absence.
Parent Signature ____________________________

Printed Name ____________________________ Date __________

Medical: Student has a medical/dental appointment or other pre-planned medical situation for two or more days.

Family Event: Funerals, religious holidays or other special one-time events. Up to 5 days excused if the event is out of state.
Description: ________________________________

Parent Signature ____________________________

Printed Name ____________________________ Date __________

The absences for this trip will be:  □ Excused     □ Unexcused

Administrator Signature ____________________________ Date __________