

Pre-Approved Absence Request

Student Name (as it appears on official records): _____

Homeroom Teacher: _____

Reason for Absence Request:

Date(s) of Requested Absence: _____

POLICIES AND PROCEDURES FOR A PRE-EXCUSED ABSENCE

1. Pre-approved Absence Request Form completed, signed, dated and returned to the Computer Operator in the Guidance Office at least one week prior to the absence.
2. Approval will be decided by administration.
3. A copy of this form will be given to the student by the Computer Operator in the Guidance Office.
4. The student then takes the form to all of their teachers to make them aware of the absence.
5. It is the responsibility of the student to make up assignments. Teachers are NOT required to provide work ahead of time.
6. Students can check teacher websites daily to determine what was missed. Students will have one (1) day for every day missed to turn in ALL assignments.
7. Please understand that for us to comply with the state attendance law, this pre-approved absence must be considered as part of the 15 (total excused and unexcused) absences that we can excuse without a doctor's verification. Once 15 absences have been accumulated, during the school year, we must have a doctor's signed and dated verification (letter or note) to approve any absence.

I, _____ have read and understand all conditions stated above.

Parent/Legal Guardian Signature: _____

Date: _____

Administration Approval: _____ **Date:** _____