

SECONDARY PRE-ARRANGED ABSENCE/TARDY/EARLY DISMISSAL

This form should be turned no later than one week before the requested absence.

NAME: _____ GRADE: _____

Requests permission to:

_____ come late _____ leave early _____ be absent on: _____
(date and time)

Reason:

- _____ medical/dental appointment
- _____ illness/death in family circle
- _____ mission meeting or outreach
- _____ legal paperwork/appointment
- _____ other/see note

OFFICE USE ONLY:

Date request received: _____

Excused q

Unexcused q

Initials

Make-Up Work: If the absence is excused it is the student's responsibility to find out from the teacher what work will be assigned during the time he/she will be absent. The burden of responsibility for completing make up work rests upon the student rather than upon the teacher.

Parent Signature: _____

NOTE TO 7-12 STUDENTS: 1. Take this form to the main office to get administrative approval. 2. Have teachers for each class to be missed sign this form. 3. Return this form to the office when you have all of the signatures.

NOTE TO TEACHERS: If you are NOT in agreement with the proposed absence, let the office know.

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Teacher approval (initials) and comments or conditions:

Period

1st _____

2nd _____

3rd _____

4th _____

5th _____

6th _____

7th _____
