PREARRANGED ABSENCE FORM

Student Name: ______________________________ Grade: ________

Date(s) student will be out: ____________________________________

Reason student will be absent from school: ______________________

________________________________________________________________

Parent Signature: ____________________________________________

________________________________________________________________

Student is required to get the signature of all of his/her teachers, and to get classroom work for the period of time of absence.

Period 1 _____________________________________________________

Period 2 _____________________________________________________

Period 3 _____________________________________________________

Period 4 _____________________________________________________

Period 5 _____________________________________________________

Period 6 _____________________________________________________

Period 7 _____________________________________________________

Period 8 _____________________________________________________

Make sure this is brought to the Attendance Office before you leave. Thank you!!

Attendance Clerk: ___________________________ Date: _____________