



## PARENT REQUEST FOR STUDENT ABSENCE

**\*Note:** This form must be submitted to the elementary office and approved prior to the date(s) of absence.

Name of Student \_\_\_\_\_

Grade \_\_\_\_\_ Homeroom \_\_\_\_\_

Date(s) of Absence \_\_\_\_\_

Name of Parent/Legal Guardian \_\_\_\_\_

Destination/Reason of Absence \_\_\_\_\_

Approval for a travel-approved absence necessitates that the parents/legal guardian and student assume responsibility for the following:

1. All classroom work which is covered during the absence.
2. All materials which are recorded for grading purposes will need to be completed by the student during the first six-day cycle immediately after his/her return.

PARENT SIGNATURE \_\_\_\_\_

STUDENT SIGNATURE \_\_\_\_\_

(Office Use Only)

Date Submitted to Office \_\_\_\_\_ Personnel Initials \_\_\_\_\_

Principal's Signature \_\_\_\_\_