



Planned School Absence Form

This form must be complete for ALL planned absences regardless of their length.

I have read the policy in the school handbook regarding planned absences.

(Signature of parent completing form)

Date form submitted to Superintendent: _____

Student's name: _____

Dates of planned absence: _____

Reason for absence (if applicable, please explain why the event must take place during scheduled school days):

1. Does your child faithfully submit completed homework on time? Yes No
2. Is your child currently receiving a "C" or better in all subjects? Yes No
3. Did the Superintendent receive this form at least 2 weeks prior to the planned absence?
Yes No

(If you answered no to any of the four questions above, the absence may not be excused)

Is there anything that you think the Superintendent and classroom teacher should know that would impact the decision to excuse the absence?



Excerpt from the Academic Policy section of the School Handbook:

We ask that every effort be made to schedule all appointments for non-school time, out of consideration for the child, his/her classmates, and the teacher. Excusable absences are those resulting from illness, medical, dental, optometric appointment, or bereavement. Examples of non-excusable absences are absence from school to run errands for parents, absence from school to help care for children, absence from school because of family travel or vacation plans unless pre-approved by the superintendent.

Planned absence from school for any reason will be marked as "unexcused" unless the planned absence form has been submitted to the superintendent at least 2 weeks prior to the planned absence. Submitting the form does not guarantee that the absence will be excused. Other factors such as the student's grades, their ability to keep pace with their class, their history of missing work and the reason for the absence will be considered before the absence will be excused. The Planned Absence Form can be found on the school website or at the school office.