## **Elementary Pre-Arranged Absence Request**

Parents and guardians are required to notify the school attendance officer or designee prior to leaving and the student is expected to make up all work that is missed. Requested days may be counted against a student's 10 parent-excused days.

## Instructions:

- This form should be used for family events/vacations. This form should not be used for upcoming doctors/dental appointments, funerals and/or other absences.
- Submit Pre-Arranged Absence Request form to the School Office at least five school days prior to the first date of the absence.

| Parent Portion:        |                              |                        |                                |         |
|------------------------|------------------------------|------------------------|--------------------------------|---------|
| Student Name:          |                              | Grade:                 | Teacher:                       |         |
| Today's Date:          | Total Days Out:              | Date Leaving:          | Return Date:                   |         |
| Absence Reason:        |                              |                        |                                |         |
| Educational Aspects of | of trip:                     |                        |                                |         |
| Teacher Portion:       |                              |                        |                                |         |
| Date Received by teac  | her:                         |                        | •                              |         |
| Student will be missin | g (tests, assessments, ev    | ents, etc.):           |                                |         |
|                        |                              |                        |                                |         |
| Teacher comment:       | -                            |                        | act their continued progress.  |         |
|                        |                              |                        |                                |         |
|                        |                              |                        |                                |         |
| Office Portion:        |                              |                        |                                |         |
| Current Attendance pr  | int out attached (Office In  | itial):                |                                |         |
| General Absences       | Doctor Approved:             | Unexcused Abser        | nces: Tardies:                 |         |
|                        | d current available days the | _                      | as been made regarding this ab | isence: |
| # of days approv       | ved and applied toward th    | e 10 general absence d | ays                            |         |
| # of days approv       | ved and exempted             |                        |                                |         |
| # of days unexc        | used                         |                        |                                |         |
| Parent Contact Date:_  |                              |                        |                                |         |
|                        |                              |                        |                                |         |
| Signature of Principa  | al;                          | ·                      | Date:                          |         |

Parent Copy//Office Copy//Teacher Copy