

**REQUEST FOR EXCUSED ABSENCES FROM SCHOOL FOR A PRE-PLANNED EDUCATION TOUR OR TRIP
(One copy for each student)**

| | |
|-----------------------------|-------|
| Student's Full Name | _____ |
| Student Number | _____ |
| Grade & Section | _____ |
| Dates of Absence | _____ |
| Total Number of Absent Days | _____ |

| | |
|---|-------|
| Person directing/supervising student: Name | _____ |
| Address | _____ |
| City/State/Zip Code | _____ |
| Telephone Number | _____ |

The district policy on pre-approved absences is:

1. Parent or guardian will inform the principal IN ADVANCE, on this approved district form, of the reason for the absence. A week's notice is requested.
2. Pre-approved absences will NOT be approved for either standardized test or semester exam days.
3. Total pre-approved absences during the school year will not exceed five (5) school days.
4. All pre-approved absences will be recorded as an excused absence.

Describe your Pre-Planned Education Tour or Trip:

| |
|-------|
| _____ |
| _____ |

Homeroom Teacher's Signature _____

| Per. | Subject | Teacher's Signature | Date | Comment |
|------|---------|---------------------|------|---------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |

STUDENTS ARE REQUIRED TO COMPLETE ALL ASSIGNMENTS AND TESTS DEEMED NECESSARY BY THE TEACHER (S) AS A CONDITION FOR THE PRE-APPROVED ABSENCE. ALL HOMEWORK ASSIGNMENTS ARE DUE ON YOUR RETURN TO SCHOOL (EXCEPT WHERE NOTED ABOVE). TESTS ARE TO BE TAKEN AT THE TIME AND DATE SCHEDULED BY THE TEACHER(S).

Were there prior requests this school year? _____

**Please Return to your Unit
Principal/Dean of Students for
approval**

Date(s) _____

**Unit Principal's decision (initial
one):**

Parent/Guardian signature _____

Phone Number _____

Date: _____

Approved _____

NOTE:

1. This form is to be used in place of the written excuse.
2. The student and teachers must complete this form.

Not Approved _____