

Student Pre-arranged Absence Request

Today's Date: _____

Name(s) of child(ren): _____

Parent/Guardian Name: _____

This form must be received in the office 7 days prior to absence.

Reason for absence:

Date(s) of absence: _____

Parent/Guardian signature: _____

Office Use Only:

- Absence is **excused**
- Absence is **unexcused**

Reason for unexcused absence: _____

Attendance Designee signature: _____