

Pre-Arranged Absence Form



Student Name: _____ Grade _____

School: _____

Date(s) of Absence: _____

Reason for Absence: _____

The following must be signed by each teacher.

It is the Parent's responsibility to initiate communications (in a timely manner) with the appropriate teacher(s) regarding whether a student will take supplemental work with them or if they will receive make-up work after the excused absence.

Class Teacher Name	Teacher Signature / Notes

Parent Signature: _____ Date: _____

Telephone contact during absence: _____

Student Signature: _____ Date: _____

Administrator or Designee signature: _____ Date: _____

This form must be completed and submitted to the school no later than 3 days prior to the scheduled absence.