



Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Date Submitted: \_\_\_\_\_ Requested Dates for Absence: \_\_\_\_\_

Reason for Absence: \_\_\_\_\_

Students are responsible for obtaining assignments and completing missed work. Return this form to the attendance office at least 2 days before your absence.

**I understand that all assignments, tests and quizzes must be completed  
within a week of my return to class.**

**Student Signature:** \_\_\_\_\_

Teachers: Your signature means that you have been informed of the absence, not that you approve of it.

Period 1 Teacher Signature _____ Assignments/Comments _____	Period 5 Teacher Signature _____ Assignments/Comments _____
Period 2 Teacher Signature _____ Assignments/Comments _____	Period 6 Teacher Signature _____ Assignments/Comments _____
Period 3 Teacher Signature _____ Assignments/Comments _____	Period 7 Teacher Signature _____ Assignments/Comments _____
Period 4 Teacher Signature _____ Assignments/Comments _____	Period 8 Teacher Signature _____ Assignments/Comments _____

Administrator's Signature \_\_\_\_\_ Date: \_\_\_\_\_ Excused \_\_\_\_\_ Unexcused \_\_\_\_\_