

REQUEST FOR PRINCIPAL APPROVAL OF ABSENCES

STUDENT'S NAME:		DOB:		
REASON FOR REQUEST:	☐ Educational Trip	□ Ha	ardship	
DETAILS OF REQUEST (if a related to the child's curren	n educational trip, plea nt standardized curricu	se state how th lum):	e trip will be beneficial and	
PLAN FOR RECOVERY OF A	CADEMIC INSTRUCTIO	N MISSED DUE	TO ABSENCES:	
Parent Signature	□ Approved	□ Denied	Date	
Principal Signature			Date	
PRINCIPAL REQUIREMENT	S FOR APPROVAL OR F	REASON FOR DE	ENIAL:	