

Your child/children has used ____ out of 6 Principal Approval Absences allowed per school year.

REQUEST FOR PRINCIPAL APPROVAL OF ABSENCES

STUDENT'S NAME	DOB
SCHOOL Religious Holiday REASON FOR REQUEST:	GRADE (this form needs to be completed and submitted prior to the absence hip if the parent has prior knowledge,or within 3 days following the absence.)
DETAILS OF REQUEST (if an educational trip, please state how the trip will be beneficial and related to the child's current standardized curriculum):	
PLAN FOR RECOVERY OF ACADEMIC INSTRUCTION MISSED DUE TO ABSENCES:	
Parent Signature	 Date
Parent Name <i>(Please Print)</i> Approved Denied	
Principal Signature	Date
PRINCIPAL REQUIREMENTS FOR APPROVAL OR REASON FOR DENIAL:	
1) This form must be COMPLETED and SUBMITTED PRIOR to the absence(if the parent has prior knowledge),or within 3 days following the absence 2) Approval based upon students attendance.	
For Educational Trips, please list any school-aged siblings that will also be on the trip and the school(s) they attend below:	