

VICTORIA INDEPENDENT SCHOOL DISTRICT Office of Advanced Academics 102 Profit Drive, Victoria, Texas 77902 361.788.9269 Fax 361.788.9642

Program for the Gifted and Talented Request for Furlough

Student Name	Student ID Number	Date of Birth
Campus		Grade
Furlough requested by:		
Length of time requested for furlough	n (one semester to one scho	ool year):
Reason(s) for request:		
Committee Decision (Check one.):		
•		(length of time)
☐ Furlough not granted/ret		
\Box Furlough not granted/exit	G/T Program; complete "N	otification of Exit" form
Comments:		
Signatures of committee members:		
Student	Parent/Guardian	
Teacher	Counselor/Principal	
Committee convened on:		

Original of this form to Advanced Academics Coordinator Copy in student cumulative folder Copy to student or parent/guardian

The Victoria Independent School District does not discriminate against any person on the basis of race, color, national origin, gender, disability, or age for admission, treatment, or participation in its educational programs, services and activities, or employment.