	Office Use Only
Date	Received:

Pre-Arranged Absence Request

Student's Name:		Today's Date:
Student's Grade Level:	Parent's Name:	
I am requesting that my child be	e allowed a pre-arranged a	absence on the following date(s):
Purpose of the Pre-Arranged A	bsence:	
no more than five (5) days may taken from school, the following in an unexcused absence): Complete this form at le provide assignments. Planned activity must in grandparent. A student may have up Planned absences are r Break/Spring Break). Pre-arranged absences No pre-arranged absences Students seeking a pre- The principal may grant	to be pre-arranged per school guidelines are to be followed ast five (5) school days in avolve participation with the to five (5) prearranged absonot recommended to extension are countable toward the ce will be approved during carranged absonoce must be a waiver for emergency of	the final eight (8) days of the semester. e passing all classes or subjects. r unusual circumstances.
 Last eight (8) days of th 	Testing (SAT, PSAT, ILEAR	N and IREAD Testing)
Parent's signature		
Office Use Only		
Approved		
Denied because		

Principal's Signature/Date