



CH & EL PRE-ARRANGED ABSENCE FORM

STUDENT NAME: _____

DATES OF ABSENCE: _____

REASON FOR ABSENCE: _____

DATE FORM COMPLETED: _____

Lessons and Activities the student will be missing while absent:

Lessons	Activities	Notes

Parent Print Name: _____ Date: _____

Parent Signature: _____

Teacher Signature: _____ Date: _____

Days Already Absent: _____

Administrator or Designee signature: _____ Date: _____

Approved

Unapproved

This form must be completed and submitted to the **school office** at least **3 school days prior** to the scheduled absence or it is automatically unexcused.

In order for the absence requested to be excused, the student must meet two or more of the following conditions. **please check all that apply*

____ Child is in good academic standing

____ Child has no unexcused absences

____ Child has 5 or fewer absences in a semester or 10 or fewer in a school year

*After you have reached your 10 days all absences are unexcused unless given administration approval.