

High School Event Absence

Student Legal Name _____ Student ID#: _____
(last Name, First Name)

Grade: _____ was absent on the following date(s) because of one of the following lawful reasons for the absence.

(Complete one):

- Illness or injury on _____ (MM/DD/YYYY)
- Death in the immediate family on _____ (MM/DD/YYYY)
- Medical or Dental Appointment on _____ (MM/DD/YYYY)
- Court on _____ (MM/DD/YYYY)
- Religious Observance on _____ (MM/DD/YYYY)
(Prior approval required for excused absence documentation attached)
- Educational Opportunity on _____ (MM/DD/YYYY)
(Prior approval required for excused absence documentation attached)
- Other (specify) on _____ (MM/DD/YYYY)

For the following reason(s);

COMPLETED FORMS SHOULD BE RETURNED TO MAIN OFFICE

Parent Signature: _____ Date: _____

Contact Phone Number: _____

-----FOR SCHOOL USE ONLY-----

Date received ___/___/___ Date Absence Entered ___/___/___

Entered by: _____ Signature: _____