Date: __________________________

Name: ___________________________ Grade: _____

(First and Last)

(Check Applicable)

☐ Was absent on __________________________
Due to ______________________________________________________________________

☐ Is late due to __________________________________________________________________

☐ Will be picked up by __________________________
At ______________ AM/PM, for __________________________________________________________________

☐ Death in Family (relationship) ____________________________________________________

☐ (OTHER) __________________________________________

If doctor’s note is required, please attach it to this form.

*Reminder: Educational Trip Forms need to be completed for all educational leave. The form should be filled out and submitted to your child’s school ten days prior to student departure.

Parent/Guardian Signature: __________________________

Date: __________________________

Name: ___________________________ Grade: _____

(First and Last)

(Check Applicable)

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Parent/Guardian Signature: __________________________