

INGRAHAM HIGH SCHOOL
REQUEST FOR PRE-PLANNED EXCUSE ABSENCE FORM

NOTE: This fully completed form must be submitted to the Attendance office at least **three (3) school days** before the start of the planned absence. **For multiple siblings** complete and submit a separate form for each student.

Student Name: _____ ID#: _____
 (First) (Last)
 Date(s) of Absence(s): _____ Grade: _____

Reason for Absence: (check one):

- _____ Extended Medical (medical/dental appointment or other pre-planned medical situation)
- _____ Religious observation/holiday/instruction
- _____ Special one-time event (specify) _____
- _____ Educational trip (to be excused a plan must be made prior to departure for how the trip is educational and how the student will report on what they learned during the trip. The plan also must include information about when and how the missed class work or assignments will be completed & *attached to this form*)
- _____ Family vacation – *Family vacations of any duration is unexcused. Extra days before or after school holidays is unexcused including out of state or out of country.*

Completed by Student’s Teachers: (BEFORE Parent/ Guardian Signs)

Teachers: Initial in appropriate space	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6
Will need to make up work						
Will not need to make up work						
Will adversely affect class progress and work CANNOT be made up						
SHOULD NOT miss class (student in danger of failing class)						
Student’s current grade in class						

I have read the above and am aware of the teachers’ comments regarding the effect of this absence on my student’s class progress. I understand that teachers’ initials **DO NOT** mean the absence is approved.

► Parent/Guardian Signature: _____ DATE: _____

Daytime Phone: _____ Evening Phone: _____

The absence for this trip will be [] **EXCUSED** [] **UNEXCUSED**

Principal’s Signature: _____ Date: _____