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 (recurring appointments; surgery, oral surgery – out at least 3 days)
_____ Bereavement (memorial service, funeral, 3+ days out)
_____ Religious or cultural (holiday, participation in instruction)
_____ Post-secondary visit (college, technical school, apprenticeship program, scholarship interview)
_____ A reason of faith or conscience, or for an organized activity conducted under the auspices of a religious denomination, church, or religious organization, for up to two (2) days per school year – Submit Preplanned Absence form
_____ An approved activity that is consistent with the district policy and is mutually agreed upon by the principal or designee and a parent, guardian, or an adult, emancipated or appropriately aged student. – Submit Preplanned Absence form
(a) Activities that are consistent with district policy deepen and/or expand student learning, build community awareness, develop skills, (e.g., technical, visual or performing arts, athletic) and/or prepare students for college, career and life. Activities eligible for approval include attending a youth conference, serving as a counselor at a school-sanctioned outdoor education program and participating in an activity sponsored by a nonprofit and/or community organization that relates to the policy objectives listed above.
(b) At the time of the activity the student must meet or exceed the eligibility criteria for students participating in district-sponsored activities and have a plan in place for making up missed classroom activities and assignment.
_____ Family trip – Family trips, visits/vacations of any duration are not excused.

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

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

Date: ___________________________

09012021