

St. Monica Parish School

PREARRANGED ABSENCE GRADES 6 - 8

STUDENT _____ GRADE _____

REASON FOR
ABSENCE _____

DATE(S) OF ABSENCE(S) _____

TO THE STUDENT OR PARENT: This form must be COMPLETED and signed by appropriate teacher(s), parent/guardian and returned to the Principal prior to the absence(s).
If the form is not RETURNED, it will be assumed that you have decided not to take this absence and we will expect you in class as scheduled.

CLASSROOM TEACHER	TEACHER'S INITIALS	COMMENTS

This absence form is to be used when the student will miss one full period or more.

Absences, whether excused or unexcused, count within the attendance requirements specified in the School Commission policy.

Date _____ Parent Signature _____

Date _____ Principal Signature _____