

St. Monica Parish School

PREARRANGED ABSENCE GRADES PreK - 5

STUDENT _____ GRADE _____

REASON FOR
ABSENCE _____

DATE(S) OF ABSENCE(S) _____

TO THE STUDENT OR PARENT: Print this form. This form must be COMPLETED and signed by appropriate teacher(s) and returned to the Principal prior to the absence(s).

CLASSROOM
TEACHER

TEACHER'S INITIALS

COMMENTS

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 _____