

**JAC-CEN-DEL COMMUNITY SCHOOLS
PRE-ARRANGED ABSENCE FORM**

STUDENT INFORMATION:

STUDENT NAME: _____
SCHOOL OF ENROLLMENT: _____

TODAY'S DATE: _____
STUDENT GRADE: _____

ABSENCE INFORMATION:

I request a prearranged absence for my child from _____ to _____

Please provide details about the reason for the requested absence:

____ Medical ____ Religious ____ Civic Engagement Activity ____ Extended Vacation ____ Other

Please provide any additional information regarding the absence you feel is necessary:

CLASSROOM TEACHER INFORMATION

Period	Subject	Teacher	Initials	Comments
1				
2				
3				
4				
5				
6				
7				
8				

SIGNATURES:

I understand that the school has the discretion of considering an extended absence unexcused if it does not meet the established definitions of what constitutes an excused absence based on the student handbook.

Student Signature

Date

Parent Signature

Date

ADMINISTRATIVE DECISION:

____ Prearranged Excused Absences

____ Prearranged Unexcused Absences

Assistant Principal Signature: _____

Principal Signature: _____