

Assumption-St. Bridget School: Pre-planned Absence Form

Please complete this form and turn it in to the office. We ask for at least two weeks' notice where that is possible. Once this form is received, office staff will share the information with your child(ren)'s teachers. If the reason for absence is different for multiple siblings, please complete a separate form for each student.
 Further detail about the attendance policy can be found in the Family Handbook.

Student	Class/Teacher	Student	Class/Teacher

Dates of absences: _____ **Date of return to school:** _____

Reason for absence: (Please check one.)

___ **Medical:** Absence is due to personal illness or injury or medical or dental procedure. (**Excused absence**)

___ **Family vacation:** (**Unexcused absence**)

___ **High school visit:** For 8th graders, up to three school days may be used for high school visits. (**Excused up to 3 visits**)

___ **Other:** _____

In making this decision to have my child(ren) miss school, I understand that it is my responsibility to assist my child(ren) in completing any work or other learning activities that will be missed during this absence.

Parent signature _____ Date _____

This absence is recorded as: Excused Unexcused

Administrator signature _____ Date _____