

**PREARRANGED ABSENCE/FIELD TRIP**

**(COMPLETE AND RETURN TO THE ATTENDANCE OFFICE OR THE ADVISOR  
AT LEAST 48 HOURS IN ADVANCE OF PLANNED ABSENCE)**

STUDENT NAME \_\_\_\_\_ GRADE \_\_\_\_\_ STUDENT # \_\_\_\_\_

DATE(S) OF ABSENCE \_\_\_\_\_ REASON \_\_\_\_\_

STUDENT: The above information **must be filled in completely** before this form is taken to any teacher for approval. Write your assignments in your planner or make a copy of this form before turning it in to the attendance office.

TEACHERS: Please indicate student's current grade and assignments that will be missed because of this proposed absence, and **whether or not student has your permission to miss your class for the trip/activity.**

PERIOD	MAKE-UP ASSIGNMENT	CURRENT GRADE	ABSENCE WILL JEOPARDIZE STUDENT'S CHANCE OF PASSING		TEACHER SIGNATURE
0			Yes	No	
1			Yes	No	
2			Yes	No	
3			Yes	No	
4			Yes	No	
5			Yes	No	
6			Yes	No	

If this absence will jeopardize the student's chances of passing any class, this student may be called in for a conference and the parent may be contacted by telephone or mail. After an assessment has been made regarding the student's grades in relation to any planned absences, parental authorization in writing will be needed for any student who may be in danger of failing because of this proposed absence from school.

PARENT SIGNATURE: \_\_\_\_\_  
(Required if separate note not provided)

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(OFFICE USE ONLY)

Parent contacted by telephone or mail \_\_\_\_\_ Date \_\_\_\_\_ Result \_\_\_\_\_

Student contacted by administrator \_\_\_\_\_ Date \_\_\_\_\_ Result \_\_\_\_\_

Parent/Administrator conference held with \_\_\_\_\_ Date \_\_\_\_\_

Comments and/or results of Conference \_\_\_\_\_

Administrative Signature \_\_\_\_\_ Date \_\_\_\_\_

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_