



## Surprise Lake Middle School PREARRANGED ABSENCE FORM

This form must be completed, **at least one week in advance**, prior to the scheduled absence. The Administrator will have final determination of whether the absence will be marked as excused or unexcused.

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Date absence begins \_\_\_\_\_ Date student returns \_\_\_\_\_

Reason for Absence \_\_\_\_\_

This form must be initialed by the appropriate teacher(s) and signed by your parent/guardian. RETURN the COMPLETED form to the Attendance Office prior to your absence.

Period	Teacher/Subject	Initials	Current Grade	Comments (i.e. make-up deadlines, impact on grade, concerns)
1				
2				
3				
4				
5				
6				
7				

I understand that it is my responsibility to obtain and complete assignments missed due to my absence and submit my work according to the time schedule set by each teacher.

Student signature \_\_\_\_\_ Date \_\_\_\_\_

**Parent/Guardian:** I have seen the teacher's comments and am aware of the effect this absence may have on my student's academic status. Absences may not be approved if it is determined the absences cause serious adverse impact on the student's educational progress.

Parent/guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Excused     Not Excused     Against Educational Advice

Administrator Signature \_\_\_\_\_ Date \_\_\_\_\_