STUDENT PRE-APPROVED VACATION FORM

Student Nar	me:							
Date(s) of A	Absence: _							
Reason for A	Absence: ch note fr	om parei	nt or gua	rdian to	this form	•		
********* Teacher In		*****	****	* * * * * * * * *	*****	****	****	****
Period 1	2	3	4	5	6	7	8	
Student date(s) o			ssignm	ents to	be mi	ssed <u>Pl</u>	RIOR to	
Assignment returns. In t					full day o	of school	after the studen	ıt
	cover the	e subject r	natter and	l help bet	ter prepar	e the stud	eacher feels the ent for proper	at it is
***Pleas hours be			_	ote to t	he high	school	office 24	
Student Signature							Date	
Parent Signature						Date		
	Princi	pal Signa	ture				Date	
Days missed will count as: "excused absences"						"unexcused absences"		

1 st hour: Name of class
Current Grade
Teacher information about assignments to be completed:
•
Teacher signature
Parent signature

2 nd hour: Name of class
Current grade
Teacher information about assignments to be completed:
Teacher signature
Parent signature

3 rd hour: Name of class						
Current grade						
Teacher information about assignments to be completed:						
Teacher signature						
Parent signature						

4 th hour: Name of class
Current grade
Teacher information about assignments to be completed:
Teacher signature
Parent signature

5 th hour: Name of class
Current grade
Teacher information about assignments to be completed:
Teacher signature
Parent signature

6 th hour: Name of class					
Current grade					
Teacher information about assignments to be completed:					
Teacher signature					
Parent signature					

Current grade	<u>.</u>			
Teacher informat	ion about assignm	nents to be com	pleted:	
				•