

Tenino High School

Pre-Arranged Absence Request

Student Name:			
Grade:		Parent/Guardian Name:	

I am requesting that an absence be approved and excused for the following reason:

_____ on and including the following dates: _____ to _____. **I understand that if my student has a D or F in any class, this request may not be approved per district policy #3122 because the absence may be considered to adversely impact the student's educational progress.**

Parent/Guardian Signature: _____ **Date:** _____

STUDENT: Please have each teacher fill in the information below. When completed, return the form to the Attendance Secretary.

PERIOD	SUBJECT	CURRENT GRADE	HOMEWORK and COMMENTS	TEACHER SIGNATURE
1				
2				
3				
4				
5				
6				
Attendance Office Signature:				

ADMINISTRATIVE ACTION:

Based on the information provided above, this request is: Approved ____ Not Approved ____

Administrator Signature: _____ Date: _____