

ALKI ELEMENTARY SCHOOL
Planned Absence Form

Note: This form must be submitted to the Principal at least 3 school days before the start of the planned absence. If the reason for absence is different for multiple siblings, please complete a separate form for each student.

Student Name: _____ Teacher/Room #: _____

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My child (ren) will be absent from school from _____ through _____

Reason for Absence: (Please check one)

_____ **Medical:** Student has a medical appointment or other pre-planned medical situation.

_____ **Family Event:** Funeral or religious holiday. Up to 5 days excused if the event is out of state.

_____ **Family Vacation:** **Family vacations are not excused. Students will be marked unexcused absent for the duration of the vacation.**

Parent Signature _____ Date _____

The absences for this trip will be excused _____ not excused _____

Administrator Signature _____ Date _____

_____ **Educational Trip:** To be excused, a plan must be made prior to departure for how the trip is educational and how the student will report on what they learned during the trip. The plan also must include information about when and how missed class work or assignments will be completed and turned in. **(Please submit plan with this form)**

Parent Signature _____ Date _____

Plan is approved and trip is excused _____ Plan is not approved and trip is not excused _____

Administrator Signature _____ Date _____