

SCHEDULED ABSENCE REQUEST

Scheduled Absences are counted as absent days and are not an excused absence.

Date: _____

Family Name _____ Phone # _____

For
Administrator
Use

Email (Print clearly) _____

Student Name	Grade	Teacher	
First Last	Grade	Teacher	

The above students will not be attending school on the following dates:

(month, date(s), year) _____

Reason for Absence _____

I understand that it is my responsibility to email the teacher(s) and notify them of the planned absence and I understand that their homework may not be available prior to my scheduled absence and my students may need to make up the missed assignments when they return. I also understand that APA has a 95% attendance goal and this absence may affect that goal. I acknowledge that if my student misses 10 consecutive days of school, he/she may lose their enrollment status on the 11th day of consecutive absence.

Parent Signature

For Administrator Use

Reviewed: _____ (Administrator) Date: _____

Notified : Parent _____ Teacher _____ Entered in Aspire/Alma _____