

North High School

PREARRANGED ABSENCE FORM

(**must be returned to attendance prior to leaving**)

Student Name *(printed)* _____

Dates student will miss school: _____

Reason for absence and destination: _____

Requested absences could have a serious detrimental impact on the student's grade, credits earned, and possible graduation status. Parents should carefully weigh these considerations before signing and returning this form.

*Parent Signature _____ Date _____

Parents should note the grades and work listed below before signing this request.

Student Signature _____ Date _____

I agree to complete, in advance, the work I will miss on the above days.

Hour	Course Name	Teacher Signature	Current Grade	Teacher Approval	Homework missed
EB					
1					
2					
3					
4					
5					
6					
7					