CIMS - Parent Request for Extended Student Absence

Student Name:
Parent/Guardian's Name:
Grade: Advisory/HR Teacher:
Reason for student absence:
Date that the absence will begin:
Date that the student will return to school:
Number of days that the student will be absent from school:
By requesting this pre-arranged absence for my child(ren), I understand that:
 It is my responsibility to communicate with teachers. It is mine and my child's responsibility to retrieve make-up work that occurs as a result of the absence.
Parent Signature:
Date:
Office Use:
Date received in office:
Absence is: Approved Denied
Absence Type: Excused Unexcused Family Business Educational
Principal Signature:
Date:
Date returned to secretary:
Date parent notified:

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