DIMENSIONS OF LEARNING ACADEMY

PRE-ARRANGED ABSENCE REQUEST

THE PARENTS OF _____ ARE REQUESTING THAT THIS STUDENT BE ABSENT FROM SCHOOL FOR _____ SCHOOL DAYS FROM _____ TO _____ FOR THE PURPOSE OF _____. WE REQUEST THAT THE STUDENT BE GIVEN MAKEUP WORK FOR THIS PERIOD OF TIME.

_____ DATE OF REQUEST

_____ PARENT SIGNATURE

Subject	Grade Standing	Teacher	Can this student afford to miss school at this time?
Art			
Music			
PE			
Band			
Orchestra			

TO THE PARENTS OF _____

THIS IS TO CONFIRM THAT THE SCHOOL IS AWARE OF YOUR PLANS AND THAT YOUR CHILD WILL BE ABSENT FROM SCHOOL ON THE FOLLOWING DAYS: _____

WE FEEL THAT WE CAN _____ CANNOT _____ APPROVE THIS REQUEST.

_____ DIRECTOR
DIMENSIONS OF LEARNING ACADEMY