

**ABSENCES AND EXCUSES**

**Skagway School  
Planned Absence Form**

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Date Initiating Form \_\_\_\_\_ **Planned dates and reason for student absence:**

I, parent or guardian of the above named student, hereby notifies the Skagway School District of the planned absence documented above. I understand that the Skagway School Board Policy states that my son/daughter's absence may be excused if the following conditions are met:

- 1. IF ANY GRADES ARE BELOW GRADE LEVEL OR A "C" OR BELOW, the parents are required to meet with the teacher and principal to discuss the work expected. Office prints a grade report when this request is submitted.

\_\_\_\_\_  
Office Signature

\_\_\_\_\_  
Date

- 2. This absence will not result in total semester absences in excess of 15 days unless an Attendance Waiver is approved.

\_\_\_\_\_  
Office Signature

\_\_\_\_\_  
Date

- 3. That this form is turned into the office three (3) days prior to a planned absence of one, two or three days and five (5) days for a planned absence of more than three days but less than a week (5 days). FOR A PLANNED ABSENCE OF ONE WEEK (5 days) OR MORE, THIS FORM IS TURNED INTO THE OFFICE TWO WEEKS IN ADVANCE.

- 4. Vacation Work Procedure

- a) Teachers will provide work for up to two weeks of vacation.
- b) On the third week of vacation, parents/students must contact the teacher/school for additional assignments.
- c) Student will receive class work by the last day of attendance before vacation.
- d) Parent(s) need to schedule an appointment with the teacher(s) for vacations that extend beyond two weeks.

- 5. My son/daughter complies with the make up work policy which states that he/she has five school days from the day he/she returns to school to complete MISSED ASSIGNMENTS. If the planned absence is five days or less, the student has a day for each day absent to complete MISSED ASSIGNMENTS. **If each assignment is not turned in at the end of five days, a zero will be entered into the grade book.**

- 6.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Administrator Signature

\_\_\_\_\_  
Date

*OFFICE: Please make a copy and retain the original on file. Give a copy to the student.*

**ABSENCES AND EXCUSES** (Continued)

**Assignment Sheet for Planned Absence**

TO THE STUDENT AND PARENT/GUARDIAN:

Please see all the teachers for course requirements and assignments during the planned absence before you leave school. Fill in your schedule and get each teacher's assignments PRIOR to your planned absence. Be sure that you are not risking loss of credit due to this planned absence.

**Preferred contact method and times:** \_\_\_\_\_  
 \_\_\_\_\_

SUBJECT	CURRENT GRADE	TEACHER'S SIGNATURE	ASSIGNMENTS
1 <sup>st</sup>			
2 <sup>nd</sup>			
3 <sup>rd</sup>			
4 <sup>th</sup>			
5 <sup>th</sup>			
6 <sup>th</sup>			
7 <sup>th</sup>			