

Cedarcrest High School

Pre-arranged Absence Request – Individual / Personal

Student _____ Grade _____

Date(s) of Absence _____

Reason for Absence _____

Date _____ Student Signature _____

Student Procedure:

- **Obtain Signatures from current teachers**
- **After all teachers have signed off, obtain parent/guardian signature**
- **Submit completed form to the attendance office BEFORE the date you miss**

TO BE COMPLETED BY THE TEACHERS

Teachers initial the appropriate space	Period 0	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6
Assignments MUST be submitted prior to absence							
Student MUST make up work							
Student need NOT make up work							
Absence may lower grade or cause Student to fail							
Work CANNOT be made up							

Comments: _____

COMPLETING A PRE-ARRANGED ABSENCE REQUEST DOES NOT GUARANTEE A GRANTED APPEAL IF A STUDENT GOES OVER 10 ABSENCES. PLEASE REFER TO YOUR STUDENT HANDBOOK OR CALL THE ATTENDANCE OFFICE IF YOU HAVE ANY QUESTIONS.

I have read and understood the teacher's comments
and the impact this may have on my student's academic progress

Signature of parent or guardian

Date