Pre-Arranged Absence Form

This form must be completed and submitted to the school office, with a teacher signature, no later than three (3) days prior to the scheduled absence. Complete one form per student.

STUDENT NAME: ___________________________________________________________  GRADE: ___________

TEACHER: _______________________________  DATE(S) OF ABSENCE: ________________________________

REASON FOR ABSENCE: ________________________________________________________________________
______________________________________________________________________________________________

PARENT SIGNATURE: _______________________________________________________ DATE: ______________

PHONE DURING ABSENCE: _________________________________________

Please refer to the Jeffco Board Student and Absences and Excuses Policy HERE

This form must be submitted at least three days prior to the scheduled absence. In order for the absence to be excused, the student must meet one or more of the following conditions:
1. Is in good academic standing
2. Has no unexcused absences
3. Has four or fewer excused absences in a semester, or seven or fewer in a school year. The school will enforce the written district policy for make-up work.

TO BE COMPLETED BY TEACHER:

Student: Is or Is not at grade level in all subjects (please circle)

Homeroom Teacher Name:____________________________ Teacher Signature:_____________________________

If applicable, please circle the subject the student is not at grade level:

Reading  Writing  Math  Science  Social Studies  Speaking/Listening

School Office Use Only:

Date submitted to office with teacher signature:

Good academic standing (at grade level in all subjects): Yes / No (circle one)
No. of unexcused absences: ______
Four or fewer excused absences in a semester, or seven or fewer in a school year: Yes / No (circle one)
Entered into IC by Enrollment Secretary as Excused or Unexcused (circle one) If Unexcused, parent/guardian notified on ______

Administrator or Designee signature: _______________________________ Date: ______________