Allen D. Nease High School Pre-Approved Absence Request

Student Name (as i	it appears on official records):
Grade:	Student ID Number:
Reason for Absence	e Request:
Date(s) of Request	ed Absence:
POLICIES AND PRO	OCEDURES FOR A PRE-EXCUSED ABSENCE
	bsence Request Form completed, signed, dated and returned to the Attendance Clerk in the mair ve (5) school days prior to the absence.
2. The administrati	ion will approve or deny request.
3. After administra	tive review, the form is returned to the student by the Attendance Clerk.
	s approved, it is the responsibility of the student to make up assignments. Teachers are NOT vide work ahead of time.
	eck Schoology daily to determine assignments missed. Students will have one (1) day for every day n ALL assignments.
considered as p verification. Onc	and that for us to comply with the state attendance law, this pre-approved absence must be part of the 15 (total excused and unexcused) absences that we can excuse without a doctor's ce 15 absences have been accumulated, during the school year, we must have a doctor's signed cation (letter or note) to approve any absence.
l,	have read and understand all conditions stated above.
Parent/Legal Guard	dian Signature:
Date:	
Administration A	pproval: Date: