

# HILLSDALE HIGH SCHOOL

## PRE-ARRANGED ABSENCE REQUEST FORM

This must be submitted to the school attendance office at least 48 hours prior to the scheduled absence.

Student Name: \_\_\_\_\_ Student Number: \_\_\_\_\_ Grade: \_\_\_\_\_

My child, \_\_\_\_\_, needs to be absent from school on the following date(s): \_\_\_\_\_

THE REASON FOR THE ABSENCE(S) IS: (Please give a brief explanation)

\_\_\_\_\_

(Must be completed by the student with each classroom teacher in advance.)

Block	COURSE	TEACHER	WORK COMPLETION DATE	TEACHER COMMENT	TEACHER SIGNATURE
<b>1</b>					
<b>2A</b>					
<b>2B</b>					
<b>3</b>					
<b>4</b>					

- I understand that my child is responsible for getting assignments and making up tests/class work missed during this absence.
- I certify that all I have communicated is true and correct.
- I have provided my up-to-date contact numbers as follows:

\_\_\_\_\_

Home    Work    Cell

\_\_\_\_\_

Parent/Guardian name    Parent/Guardian signature    Date

\_\_\_\_\_

Student name    Student signature    Date

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(For office use only)

This absence has been: APPROVED (excused) NOT APPROVED (unexcused)  
by:

\_\_\_\_\_

Principal/designee Signature

\_\_\_\_\_

Date