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## PLANNED ABSENCE APPROVAL FORM

Students must follow these steps for a planned absence/college visit to count as an excused absence:

- 1) Complete Part I of this form
- 2) Submit form to the Attendance Office <u>a week prior to the planned absence/campus visit</u> for Part II to be completed
- 3) Once the request gets approved, you will be called to the Attendance Office to pick up the form
- 4) Communicate with your teachers regarding makeup work, and have those teachers sign Part III
- 5) Turn in this completed form to the Attendance Office
- 6) If you will be visiting a college/institution, please complete Part IV and return to the Attendance Office after your visit

Part I – To be completed by student and parent											
Student's Name:						Grade:					
Today'	s Date:		Dates Requested:			to// (last day of absence)					
Reason	for Abse	nce: 🗌 Vacation	☐ Tournament		Other	☐ College Visits (attached)					
Student's Signature:Parent's Signature:											
Part II	- Attendance	Office use ONLY	ionikas varias valastinis saikoti istavit väinet akontainys tiineis valestavas painväinet aka valenti sahkinsi	NAMESONAL ZARONSONO ARABICAS SE ROUS, VARO PARABA			THE SECRETARY OF THE SE				
Received Request On:/Year to Date Total Absences:Total # of Absences for this Request:											
Approved Denied  Comments (optional):											
Commi	ants (opti	onary									
Principal's Signature (required): Date:											
Part II	I – <u>Student se</u>	ocures teacher signature and returns to t	the Attendance Office		ANTICO CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONT						
Class Period	Current Grade	Teacher's Signature and Comm	nents	Class Period	Current Grade	Teacher's Signature and Comments					
Adv.				5							
1				6							
2				7							
3				8							
4				9							

100 East South Street, Kennett Square, PA, 19348

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Part IV - To be completed by representative of college/institution (college verification ONLY)												
Student's Name			Visited Our Campus Today.									
Name and Title of College/Institution Representati	ive:											
Signature:	Today's Date:		/	Phone:								
	<u>OR</u>											

Attach official documentation and return to the Attendance Office within THREE (3) days of your return.