

**SOUTH BURLINGTON HIGH SCHOOL
PLANNED ABSENCE REQUEST**

STUDENT NAME: _____ (PLEASE PRINT) GRADE _____

TEACHER ACKNOWLEDGEMENT AND COMMENTS

Period	Course	Teacher Signature	Comments / Assignments Due
B1	_____	_____	_____
B2	_____	_____	_____
B3	_____	_____	_____
B4	_____	_____	_____
G1	_____	_____	_____
G2	_____	_____	_____
G3	_____	_____	_____
G4	_____	_____	_____

PARENT ACKNOWLEDGEMENT AND SIGNATURE

I request that my son/daughter, _____, be absent from school on the following date(s): _____ This Planned Absence is for the purpose of: _____.

PARENT'S SIGNATURE _____

STUDENT'S SIGNATURE _____

PLEASE RETURN THIS COMPLETED FORM TO THE ATTENDANCE OFFICE 48 HOURS PRIOR TO THE PLANNED ABSENCE. Pre-approved Planned Absences allow students to make up work missed during the planned absence. Students who have extended absences and fail to submit a completed Pre-Approved Planned Absence form will waive their right to earn credit for assignments missed during the absence.

ASSISTANT PRINCIPAL'S SIGNATURE _____

This Planned Absence will be considered: ___ Excused ___ Unexcused