ROOSEVELT HIGH SCHOOL
PRE-PLANNED ABSENCE FORM

Note: This form must be submitted to the Attendance Office at least three (3) school days before the start of planned absence. This form should include information about how and when missed class work will be completed and turned in.

Student Name: ____________________________________________________________ Grade: ________

Dates of Absences: ________________________________________________________________________

REASON(S) FOR ABSENCE (Please check all that apply)

___ Medical
Student has a medical/dental appointment or other pre-planned medical situation.

Explain the situation below:
__________________________________________________________________________________________
__________________________________________________________________________________________

___ Family Event
Examples: funeral, religious holidays, tournaments, etc.

Explain the situation below:
__________________________________________________________________________________________
__________________________________________________________________________________________

___ Family Vacation
Up to 5 days may be excused if out of state or out of the country. The duration of vacation may be excused if an educational component (Educational Trip, see below) is attached.

Explain the situation below:
__________________________________________________________________________________________
__________________________________________________________________________________________

___ Educational Trip
To be excused, a plan must be made prior to departure explaining how the trip is educational and how the student will report what they learned during the trip.

If you checked EDUCATIONAL TRIP, please write down your proposed educational activities while on the trip, and what evidences you will show as proof.
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
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__________________________________________________________________________________________

Please read and sign both sides of this form.
ROOSEVELT HIGH SCHOOL
PRE-PLANNED ABSENCE FORM

CLASS ASSIGNMENT INFORMATION

<table>
<thead>
<tr>
<th>Teachers initial appropriate space</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
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<th>6</th>
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</thead>
<tbody>
<tr>
<td>Will NOT need to make up any work</td>
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<td>WILL require make up work</td>
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<td>Will affect class progress and work CANNOT be made up</td>
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<td>Puts student in danger of lower grade or failure</td>
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<td>Current Grade In Class:</td>
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</table>

I HAVE READ THE ABOVE, AND I AM AWARE OF THE TEACHER COMMENTS REGARDING THE EFFECT(S) OF THIS ABSENCE ON THE STUDENT’S CLASS PROGRESS. MY SIGNATURE SHOWS THAT I GIVE PERMISSION FOR THE ABSENCE.

Parent/Guardian Signature ____________________________ Date __________

RETURN THIS FORM TO THE ATTENDANCE OFFICE