

**NOTICE OF PLANNED ABSENCE**

This form must be filled out completely, signed by parent, initialed by teachers and principal, and turned in to the office at least one school day before the absence is to occur.

Please excuse \_\_\_\_\_  
(Student's Name)

from school on \_\_\_\_\_  
(Date)

Reason for absence \_\_\_\_\_

This is being done with my knowledge and approval. I understand that this absence in no way absolves my child from his/her turning in assignments or taking examinations. Furthermore, I fully understand that my child's grade may be affected by his/her absence.

\_\_\_\_\_  
(Parent Signature) (Date)

Each teacher should initial their approval.

Teacher	Assignment	Student is passing (Y/N)
Block 1	_____	_____
Block 2	_____	_____
Block 3	_____	_____
4A	_____	_____
4B	_____	_____
Block 1	_____	_____
Block 2	_____	_____
Block 3	_____	_____
4A	_____	_____
4B	_____	_____

\_\_\_\_\_  
(Principal's Signature) (Date)

\_\_\_ Excused      \_\_\_ Unexcused

The State of Kansas has identified an excused absence as: A) illness of the student, verified by the parent either orally to an administrator or in writing; B) doctor or dentist's appointment as verified by parent or doctor; C) death in the immediate family.

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