

**PLANNED ABSENCE FORM
NORTH OLMSTED MIDDLE SCHOOL**

Date _____

NAME OF STUDENT _____ GRADE _____

I request that my son/daughter be excused from school from _____ to _____, a total of _____ days.

REASON: _____

I understand that each teacher will sign this form indicating he/she is aware of the pending absence. The teacher will give the student any assignments that need to be done during the planned absence.

I understand that all assignments are to be completed and turned in **no later than the day after the student has returned to school, unless otherwise arranged with the teacher.** Students may also be requested to take quizzes and tests on the same date as mentioned above.

The school is taking no responsibility to see that the student makes up this work. Parents will assume responsibility and must realize that failure to submit the work may affect the student's grade.

Teachers: Please sign below. Assignments, if given, should be given to the student as soon as possible to give them the opportunity to get started.

PARENTS SHOULD SIGN THIS FORM AFTER ALL THE TEACHERS HAVE HAD A CHANCE TO SIGN IT.

<u>COURSES</u>	<u>TEACHER SIGNATURE</u>	<u>COMMENTS/ASSIGNMENT</u>
MATH	_____	_____
SOCIAL ST.	_____	_____
SCIENCE	_____	_____
LANG. ARTS	_____	_____
ART	_____	_____
COMPUTERS	_____	_____
FCS	_____	_____
FOREIGN LAN	_____	_____
HEALTH	_____	_____
MUSIC	_____	_____
PE	_____	_____
TECH ED	_____	_____

Counselor signature

Principal/designee

Parent Signature

This form is to be returned to Guidance at least one day prior to the actual planned absence.