TYEE MIDDLE SCHOOL PRE-ARRANGED ABSENCE REQUEST FORM

Studer	nt Name:	Student ID #: _	Grade:		
Reason	n for absence:				
Date(s) of absence(s):		Tota	Total Numbers of days absent:		
and sig absence prior to	ned by ALL your teacher, and all information responds your absence, if possib	ers, signed by your parents, returned viewed/considered by the school ad le, to let you know whether your ab	excused absence, this form <u>must</u> be filled to the Attendance Office prior to the imministration. The form will be returned sence(s) will be logged as excused or under PRIOR to parents signing. Please incl	ntended l to you excused.	
			e final decision whether to excuse the ab		
PER	Teacher Signature		ing absence that student is responsible day of return to school. Make note is allowed by teacher	Approx student grade %	
1			•		
2					
3					
4					
5					
6					
7					
once I request	sign and submit this requals as written above based	uest form that the school administra	nformation provided above and understantor has the right to approve or not approve our child's teachers and any possible ol.	rove our	
PARENT SIGNATURE: DATE:					
etc. tha	t I will need to finish my		ility to gather information, worksheets, e absent. The day I return to school I vened, and attend labs as necessary.		
STUDENT SIGNATURE:			DATE:		
ADMINSTRATIVE SIGNATURE: DATE:					
	Request for excused a	bsence ACCEPTED	Request for excused absence DEN	NIED	