

Permission for Leaving

Part A REQUEST

_____ requests permission of the school to have
Parent/guardian

_____ excused from the school on the following
Name of student dates:

_____ to _____
Date Date

For the following reason(s):

- medical family trip educational tournament personal

Other:

Part B GENERAL REQUIREMENTS

- My son/daughter is fully aware he/she is responsible for submitting all missed assignments, and for writing all missed quizzes and tests.
- My son/daughter is fully aware he/she is responsible for submitting all pre-assigned work before the leave of absence, unless otherwise directed by the teacher.
- My son/daughter is fully aware he/she is responsible for catching up on all missed work within 2 days of returning to school, unless otherwise directed by the teacher.
- My son/daughter is fully aware that formative assignments will be marked at the teachers' discretion.
- My son/daughter understands that the leave of absence affects attendance standing.

Part C TEACHER COMMENTS

Course : _____ **Teacher :** _____

Assignments & due dates

Course : _____ **Teacher :** _____

Assignments & due dates

Course : _____ **Teacher :** _____

Assignments & due dates

Course : _____ **Teacher :** _____

Assignments & due dates

Course : _____ **Teacher :** _____

Assignments & due dates

Part D APPROVAL

The student and parent/guardian are aware of all the general requirements.

Signature of parent/guardian

Date

Signature of student

Date

Signature of administration

Date