

Pitt Meadows Secondary
Extended Absence Form



PARENTAL REQUEST FOR EXTENDED ABSENCE

This form should be completed and returned no later than one week before the intended absence

INSTRUCTIONS:

1. Complete the required sections;
2. Present this form to subject teachers AND grade counsellor for signature and/or comment;
3. Take the form home for parent signature;
4. Submit this form to the grade Vice Principal who will complete a process of verification;
5. Once verified, the completed form will be filed in the office and a copy given to the student.

Please Print: Date: _____ Student # _____ Grade _____

It is requested that (student) _____
(last) (first)

be excused from school for _____ school days from _____ to _____ (DATES)

The reason for this absence is _____

Parent/Guardian Name _____

Work No. _____ Home No. _____ Cell No. _____ Fax No. _____

PLEASE READ THE FOLLOWING INFORMATION

FOR PARENTS AND STUDENTS:

Regular attendance is closely correlated to academic achievement. Students are responsible for all work presented during class; whether or not they are present. Student absence from school for vacation cannot be authorized or sanctioned by the school and parents assume the responsibility for such absences. The purpose of this form is to inform subject teachers, counsellors and administration of an anticipated absence.

STUDENTS:

Students are expected to check with teachers before leaving to enquire whether any of the missed work can be completed beforehand. Not all marks can be retrieved since some graded activities are a result of in class interaction and learning. When you return, it is your responsibility to complete the required course material; where possible; in a timely manner in order to minimize the effect on evaluation.

HAVING READ THE INFORMATION, I UNDERSTAND THE INFORMATION AND EXPECTATIONS AS STATED ABOVE:

PARENT/GUARDIAN SIGNATURE: _____

ADMINISTRATOR SIGNATURE: _____

COMPUTER OPERATOR: _____

EXTENDED ABSENCE OF STUDENT

NAME: _____ STUDENT # _____

Absent for _____ day from _____ to _____

TEACHER EXPECTATIONS/COMMENTS

BLOCK	COURSE	TEACHER	COMMENT
A			
B			
C			
D			
E			
F			
G			
H			
GRADE COUNSELLOR			

SPACE FOR ADDITIONAL STUDENT OR TEACHER NOTES: