

EXTENDED ABSENCES/ABSENCE APPROVAL FORM &

(Must be completed for all planned absences of 3 or more days)

Student Name: _____ Dates of Absence: _____

Reason for Absence: _____

The Olympia School district does not feel that extended absences are in the best interest of the student. However, if the parent and student find it imperative, the administration will consider releasing the student based on the student's academic and attendance record as well as the reason for the absence. Approval frees the student from truancy status, but does not give him/her preferred status such as early testing or an extension of time before the grade award. Final examinations will not be given in advance of the scheduled dates. Please be aware that there are a limited number of discretionary days that an administrator will approve during the school year.

1. The student and parent must pre-plan the absence by completing this form.
2. The student must first obtain approval from the **Vice Principal (Mrs. Kelley Batstone)**.
3. After, **Mrs. KB** signs this form the student obtains signatures from **all teachers**.
4. Submit the completed form to the **Attendance Office**.

Period	Class	Teacher Signature	Assignments
1			
2			
3			
4			
5			
6			

Parent/Guardian signature: _____ Date: _____

Administration Approval: _____ Date: _____