KEYSTONE MIDDLE SCHOOL

REQUEST FOR EXCUSED FUTURE ABSENCES - PLANNED ABSENCE

This form must be completed and turned in to the school office 2 school days prior to the planned absence

DATE			
STUDENT NAME			GRADE
	-		es are known in advance a Request not exceed 5 days in length.
=		used absences during a sc d no credit for missed sch	hool year. All vacation days beyond oolwork will be given.
Approved days will be based on your child's attendance and House Bill 410.			
DATES OF REQUEST			
REASON FOR REQUEST			
PARENT OR GUARDIAN S	SIGNATURE		
Total school days to be mis	ssed		
Teachers: If you feel this stud	dent cannot afford to n	niss the requested days due	to low grades please signify here:
	APPROVED	DISAPPROVED	
1st Period Teacher			
2nd Period Teacher			
3rd Period Teacher			
4th Period Teacher			
5th Period Teacher			
6th Period Teacher			
7th Period Teacher			
8th Period Teacher			
9th Period Teacher			
OFFICE USE ONLY			
PRINCIPAL	APPROVED		DISAPPROVED
SUPERINTENDENT	APPROVED		DISAPPROVED