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| **Grace Christian Academy**  **REQUEST FOR PLANNED ABSENCE**  (request must be submitted two weeks prior to absence) |

Parent / Student: Complete student portion then have each teacher complete their portion.

Turn completed form to office for administrative approval.

Parent / Student is notified upon approval by administration.

PRINCIPAL TEACHERS PARENT / STUDENT

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| **Student** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Grade** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Requested Dates of Absence** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Reason for Absence** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
|  | **Subject / Class** | **Missed Assignments & Completion Date** | **Teacher comments / Signature** |
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| **Coaches / Sponsors** |  |  |
| **Comments:**  **Principal’s Approval** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |