



PLANNED ABSENCE SLIP

Student Name _____ Grade _____

Has permission to be absent from school from

_____ TO _____ inclusive
Starting Date Ending Date

Reason _____

Parent's Signature

Date

Please excuse this student from class/club activity for this period and give him/her assignments to complete on his/her own during this time.

School Trip

Club Teacher's Signature: _____

	List classes to be missed:	Teachers' signature:	Assignment:
Day 1			
Day 2			

AST Director _____ **Date** _____

This form must be signed by the ES principal or Secondary Principal on and teachers three school days before the planned absence. Then it must be returned to Registrar in HS library C2F.