

Viewlands Elementary School

Planned Absence Form

Note: This form must be submitted to the Office Assistant at least three (3) school days before the start of the planned absence. Please complete a separate form for each student.

Student Name: _____ Grade: _____ Room _____

Dates of absences: _____

Reason for Absence: (Please check one)

_____ **Medical:** Student has a medical/dental appointment or other pre-planned medical situation. Plan for excused absence is not required.

_____ **Family Event:** Funerals or religious holidays. Up to 5 days excused if the event is out of state. Plan for excused absence is not required

_____ **Family Vacation:**
(No educational plan) Family Vacations are not excused. Students will be marked Unexcused Vacation for the duration of the absence.

I understand that this is an unexcused absence. _____ (parent initial)

_____ **Family Vacation with Educational Plan is an Excused Vacation**
(Fill-out form on back) To be excused, a plan must be made prior to departure for how the trip is educational and how the student will report on what they learned during the trip. The plan also must include information about when and how missed class work or assignments will be completed and turned in.

Please return this form to the Office Assistant in the Main Office.

I request that my child's educational trip be excused. An educational Plan for his/her absence is attached.

Parent Signature _____ Date _____

Teacher Signature _____ Date _____

The absences for this trip will be Excused Unexcused

Administrator Signature _____ Date _____

Plan for Excused Vacation or Educational Trip

Student Name: _____ Grade: _____

Parents: Please use this form to create an educational plan for the above student to request that absences from school for an educational trip be excused:

Proposed Educational Activities	Grade-Appropriate Evidence of Learning
School work/assignments to be completed	Schedule of completion (How work will be completed and when it will be turned in)
Math	
Reading	
Science	
Social Studies	
Other Subjects	

We agree to this Educational Plan.

Parent Signature _____ Date _____

Teacher Signature _____ Date _____

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The Educational Plan for this student is Sufficient Insufficient.

Administrator Signature _____ Date _____