



Lafayette Christian School
Excellence in Education Centered in Christ

PLANNED ABSENCE FORM

Being a student takes full-time commitment and every student is expected to be in school when it is in session. We realize that there may be times when students will be absent from school when he or she is sick, when there is serious illness or death in the immediate family, and when there are medical and dental appointments, which cannot be scheduled before or after school. The rules are:

1. This form should be submitted by parents, and approved by the administration prior to the absence when possible.
2. The appropriate teachers are to sign this form and may include notes regarding missing class.
3. All homework and tests should be made up within 3 days of the student's return to class.
4. Family vacations will be limited to a maximum of 5 days per school year and will be excused.
5. Teachers are not required to give specific assignments or make-up work after 5 unexcused absences
6. Planned absences are not allowed during the week of semester exams

PARENT'S REQUEST

Student's Name _____ Date(s) of Absence _____

Student's Teacher _____ Grade _____

Reason for Absence _____

(Parent's Signature)

(Date)

TEACHER ASSESSEMENT

In consideration of the student's current progress in school and the curricular materials which will be covered during this time period, my assessment of granting this absence is:

(Teacher's Signature) (Date)

(Teacher's Signature) (Date)

(Teacher's Signature) (Date)

ADMINISTRATIVE ACTION

This planned absence is _____excused, _____unexcused for the requested date(s).

(Principal's Signature)

(Date)

Comments: _____