



MANFIELD JH/HS

PREARRANGED ABSENCE FORM

Name _____ Today's Date: _____

Date(s) of Absence: _____

Reason for Absence:

- | | |
|---|---|
| <input type="checkbox"/> Funeral | <input type="checkbox"/> Participation non-school related activity or sport |
| <input type="checkbox"/> Vacation / Family Trip | <input type="checkbox"/> Dental / Ortho Appointment |
| <input type="checkbox"/> Medical Appointment | <input type="checkbox"/> Other: _____ |

Student's Signature: _____

Parent's Signatures: _____

To the Student: It is your responsibility to have this form completed and returned to the Main Office prior to the absence. It is also your responsibility to collect, complete and turn in all make up work for the time missed.

To the Teacher: Your initials indicate that the student is current in class work. Please assign make up work and indicate the due date. If you feel the student needs to finish work prior to being absent, please indicate due date prior to absent date.

Administrator Signature: _____ Date: _____

Circle One:

EXCUSED

UNEXCUSED

PERIOD	ASSIGNMENTS (Most of your assignments are located on Google Classroom)	DUE DATE	TEACHER INITIALS
1			
2			
3			
4			
5			
6			