

Absence Request

Student's Name: Today's Date:
Date/s of absence:From:To:
Reason for absence request:
 I understand repeated absences and/or family holidays, outside school holidays, may affect my child's academic process and/or cause my child to fall behind academically.
 I understand repeated or lengthy absences could result in my child's inability to advance to the next academic level if knowledge of the required curriculum does not meet the expected level.
• I understand signing this form makes me fully responsible for the lessons my child will miss due to this absence.
 I understand I will be notified if my child's academic progress is in jeopardy, and I agree to take full responsibility for the actions required to stabilize my child's academic standing.
Parent/Guardian Signature: Date:
HOMEWORK CONTRACT: check the appropriate box
I have received assignments my child must complete prior to returning to CPIES. I agree to ensure my child completes these assignments independently and understands the content of the assignments prior to returning to CPIES.
I have not received assignments my child must complete prior to his/her return
Parent/Guardian Signature: Date:
OFFICE USE ONLY:
Were assignments provided for the student? YES NO
Were the assignments completed prior to returning to CPIES? YES NO
Did the student return to the classroom on level with his/her classmates t? YES NO
Is this request for an absence considered approved? YESNO If no, why?
If no, is this child at risk of being held back in the current grade due to repeated absences and/or family holidays? YESNO
If yes, have the parent/s been notified of this situation/concern? YESNO
Is there still a chance to prevent this child from being held back due to repeated absences? YESNO
If yes, what is being done to avoid this situation:
Principal Signature: Date: