Lynnwood High School

Pre-Arranged Extended Absence Form

Today's Date:	
Student's Name:	
Date(s) of Absence:	

Reason for Absence: _____

Lynnwood High School discourages students from taking family trips/vacations during the school year. Extended absences place students at an academic risk. If there is a need for an extended absence, the **school must be notified at least two weeks in advance**. Approval for an extended absence will be based on student attendance, disciplinary record, grades and reason and length of absence.

Approved vacation days, although they may be excused, count as absences that may jeopardize the student's required attendance. It is also expected that the student will communicate with teachers and make necessary arrangements to complete assignments.

Reminder: Student must submit required absence documentation to the Attendance Office two (2) weeks prior to absence. Please return to: strahand@edmonds.wednet.edu If you have any questions, please call 425-431-7535

Parent signature	Date
Administrator Approval	Date

Teacher Prior Permission for Absences

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Reason for Absence:	
Student Name	Grade
Return to the attendance office ASAP	
If gone more than 5 consecutive school days, must have signature fr	om administrator
Obtain parent/guardian signature	
Obtain signature from each teacher	

Date(s) of absence: _____

Although students may benefit from experiences outside the classroom, the successful completion of each course requires continuous classroom attendance. Participating in a field trip is a privilege. If your classroom performance and/or attendance are not satisfactory, any teacher may deny you permission to participate.

Once prior permission is arranged and approved by each teacher, students will be allowed to make up homework upon their return to school, provided they complete the homework within the period determined by each teacher.

Period	Subject	Grade	Comments	Teacher Signature
		or P/F		
1				
2				
ADV				
3				
4				
5				
6				

Parent Signature: _____ Date: _____

Administrator Signature: _____ Date: _____