

ADVANCE NOTIFICATION OF ABSENCE REQUEST

* Administrative Signature Required Prior to Teacher Signature

STUDENT MUST: (to be excused, students must read and follow all instructions below)

1. Complete information sections below and have parent/guardian sign the form **3 days prior** to scheduled absence.
2. Have the form signed by your Administrator **BEFORE** it is taken to teachers for signatures.
3. Return completed form to the **Curriculum Secretary** at least **3 School Days** prior to the scheduled absence. Form will be kept in your student file.
4. Upon return to school you must show **proof of visit** to the Curriculum Secretary within 3 days of college visit. Failure to provide proof will limit a student's opportunity to take additional visits and the previous absence will be **UNEXCUSED**.
5. **Proof must be in the form of a written document with a school official's signature on any of the following:**
 - a. **School Letterhead**
 - b. **School Business Card**
 - c. **School Pamphlet**
 - d. **Email From College**

NOTE: Work must be made up for credit. The student will be allowed the same number of days absent to make up the work. Work must be submitted within the time period to be accepted for credit. Work missed during a COLLEGE VISIT, EMERGENCY/SURGERY or NOTIFICATION absence must be made up based on the APS and La Cueva attendance policies.

- In accordance with district guidelines, absentees must provide advanced notification for "extenuating circumstances" as agreed to by the administration prior to the absence. **NOTE: College visits are treated as a "School Related Absence". Refer to the APS Behavior Handbook, pages 8-9 to review the APS School Attendance Guidelines.**

THIS SECTION MUST BE COMPLETED PRIOR TO ADMINISTRATOR SIGNATURE

PLEASE PRINT:

STUDENT _____ ID# _____ GRADE: 9 10 11 12

Student request to be absent on: _____ (Days/Dates)

Note: You are only allowed to take 5 days for College Visits

Purpose/College/State _____

☐ **EMERGENCY/SURGERY** ☐ **NOTIFICATION** ☐ **COLLEGE VISIT** (only available 2nd semester of Junior year and all of Sr year)

Parent Signature _____ Date _____

ADMINISTRATOR SIGNATURE: _____ Excused ☐ Unexcused ☐
(Grade Level Administrator)

Admin Comments/Recommendations: _____

TEACHERS: DO NOT SIGN THIS SECTION WITHOUT AN ADMINISTRATOR'S SIGNATURE

Period	Class	Teacher's Signature		Period	Class	Teacher's Signature
0				4		
1				5		
2				6		
3				7		

*After obtaining all required signatures, please give this form to the Curriculum Secretary