



ATTENDANCE FORM

DO NOT EMAIL OR FAX THIS FORM FOR EARLY DISMISSAL – HAVE YOUR STUDENTS BRING IT TO THE ATTENDANCE OFFICE BEFORE 8:30AM ON THE DAY OF THEIR APPOINTMENT SO THEY CAN RECEIVE THEIR EARLY DISMISSAL PASS.

NO EARLY DISMISSAL AFTER 2:45pm

STUDENTS LEGAL NAME: _____ DATE: _____

REASON FOR ABSENCE (CHOOSE BELOW):

☐ PARENT NOTE – DATE(S) ABSENT: _____ TIME(S): _____

Written explanation of the reason for the absence(s). Absences in excess of ten (10) days per year will not be considered excused with a parent/guardian note unless they are accompanied by official medical or legal documentation.

☐ MEDICAL/DENTAL APPOINTMENT –

Attendance credit will be given with medical documentation and partial day attendance on appt. date.

APPT. TIME: _____ TIME OUT: _____ RETURN TIME: _____ NOT RETURNING: ☐

Name of person picking up (must be listed as emergency contact for student):

☐ FUNERAL – Relationship to Student _____ DATES ABSENT: _____

☐ RELIGIOUS HOLIDAY: DATES ABSENT: _____

☐ NURSE DISMISSAL: TIME OUT: _____

Parent/Guardian Name (Print): _____

Parent/Guardian Signature (MUST BE HANDWRITTEN): _____

Phone Number to Confirm Dismissal/Absence: _____

Email to Confirm Dismissal/Absence: _____

Forgery of any school documents, including parental notes, will be punishable to the fullest extent permitted under the Student Code of Conduct. Parental notes must provide a reason for absences and the determination to excuse an absence is made by the attendance office.