

Attendance Forms

PREARRANGED ABSENCE REQUEST

Prearranged absences will **NOT** be authorized during state testing

Prearranged absences will **NOT** be authorized during High School Exams

If the pre-arranged absence is for a college visit, you must also complete a College Visit Confirmation form.

Student _____ Grade _____

Date(s) of planned absences _____

Date student will return to school _____

Reason for absence _____

By signing below, I verify that I am the parent/ legal guardian of the above named student, and plan to remove my child from the formal academic program at _____ School during the dates noted. (This form is not required for Dr. appointments etc.)

I acknowledge the Greenup County School District policy for prearranged absences and that my child’s teachers are not expected to tutor my child for work missed. This request to excuse my child is made **AT LEAST ONE (1) WEEK PRIOR** to the first day of the planned absence. Make up of assignments given during an unexcused absence will follow Board of Education Policy. My child is responsible for obtaining assignments from each teacher before the absence.

I further acknowledge that any assignment given during the absence period will be due within the school/district time frame for make up work. Any assignment that is not submitted at that time will be scored as a grade of 0%. Any tests missed will be made up within a reasonable time frame, as determined by the teachers.

Teachers Signatures: (Must be obtained at least one week in advance and prior to administrative approval)

1ST Period _____

4TH Period _____

2ND Period _____

5TH Period _____

3RD Period _____

6TH Period _____

Parent / Guardian _____ DATE _____

Principal _____ DATE _____

DPP _____ DATE _____

Attendance Forms

EDUCATIONAL ENHANCEMENT OPPORTUNITY REQUEST FORM

To request an absence to attend or participate in an educational activity, please complete this application form and return it to your school principal at least five (5) days prior to the absence. Such an absence as requested by this signed application and approved by the school principal, will be considered an excused absence. The major intent of the activity must be educational in order for the student to be granted this type of absence. The proposed activity must have significant educational value and be composed of an intensive program related to the core curriculum (e.g. art programs, dance programs, workshops that are educational in nature, college visits, etc.). The Principal will use his/her good judgment to determine if the activity meets guidelines. A student may be approved for up to ten (10) days of absence per year for this purpose. Students who are granted an absence under this law will be allowed to make up all school work. Student grades can not be affected by lack of attendance or participation in classes for approved days. **This type of absence can not occur during the school’s CATS Testing or District-wide assessments, unless there are extenuating circumstances that are approved by the Principal.** Decisions may be appealed to the Superintendent and then to the Board of Education.

Student Full Legal Name: _____ Date of Application _____

Name of School _____ Homeroom Teacher _____

Date of Birth: _____ Age: _____ Grade Level: _____ Home Phone _____

Residence Address: _____

City: _____ State: _____ Zip Code: _____

of Excused Absences To Date _____ # of Unexcused Absences To Date _____ # of Total Absences to Date _____

Date(s) of Intended Absence(s) _____

Please explain the nature of the event the student will be attending and how the activity meets the criteria of (1) having an educational purpose, (2) having “significant educational value,” and (3) how the activity is directly related to one of the core curriculum subjects of English, science, mathematics, social studies, foreign language or the arts. Please attach a schedule of activities/events to be attended. (Use additional paper, if needed, and attach to this completed form.)

Signature of Student _____ Date _____ Signature of Parent/Guardian _____ Date _____

Attendance Forms

**EDUCATIONAL ENHANCEMENT OPPORTUNITY REQUEST FORM
FOR SCHOOL USE ONLY**

(THIS SECTION TO BE COMPLETED BY THE SCHOOL PRINCIPAL / DESIGNEE)

This request must meet all three criteria to be eligible for an educational opportunity absence:

1. This request is for an absence that will have “significant educational value” and be “intensive” in nature. Yes No
2. This trip is tied to one of the core curriculum subjects of English, science, mathematics, social studies, foreign language or the arts. Yes No
3. The major purpose of the trip is educational. Yes No

As Principal, I recommend I do not recommend that this educational opportunity absence be granted.

Principal’s Rationale _____

Signature of Principal

Date

FOR CENTRAL OFFICE APPEALS USE ONLY

As Superintendent, I recommend I do not recommend that this educational opportunity absence be granted.

Superintendent’s Rationale _____

Signature of Superintendent

Date

The District grants does not grant this educational opportunity absence.

Signature of the Board Chairman

Date

Attendance Forms

APPLICATION FOR EMERGENCY ABSENCE EXTENSION

Students absent beyond the five (5) day limit without providing a physician's verification may apply for emergency absence extension from the Director of Pupil Personnel.

DATE OF APPLICATION _____

STUDENT NAME _____
First Middle Last

DATE(S) OF ABSENCE _____

REASON FOR ABSENCE(S) _____

Date(s) previously missed and reasons, i.e., parent note, doctor note, court, unexcused, etc.

Student Signature

Parent/Guardian Signature

Excused

Unexcused

DPP Signature

Date

Review/Revised:5/11/2005