

**KEYSTONE HIGH SCHOOL**

**REQUEST FOR EXCUSED FUTURE ABSENCES-PLANNED ABSENCE**

DATE \_\_\_\_\_

STUDENT NAME \_\_\_\_\_ GRADE \_\_\_\_\_

This form must be completed 2 days prior to the planned absence whenever a student will miss 1 or more days of school when the absences are known in advance. *The request cannot exceed 5 days in length.* Only 5 Vacation days will be approved as excused absences during a school year. All vacation days beyond the allotted 5 will be marked as unexcused and no credit for missed schoolwork will be given.

Please return this form to the high school office when completed.

DATES OF REQUEST \_\_\_\_\_

REASON FOR REQUEST \_\_\_\_\_

Have you used any vacation days this school year and if so how many \_\_\_\_\_

PARENT OR GUARDIAN SIGNATURE \_\_\_\_\_

Total school days to be missed \_\_\_\_\_

Teachers: If you feel that this student cannot afford to miss the requested days due to low grades or poor attendance please signify here:

1<sup>st</sup> Period Teacher: \_\_\_\_\_

2<sup>nd</sup> Period Teacher: \_\_\_\_\_

3<sup>rd</sup> Period Teacher: \_\_\_\_\_

4<sup>th</sup> Period Teacher: \_\_\_\_\_

5<sup>th</sup> Period Teacher: \_\_\_\_\_

6<sup>th</sup> Period Teacher: \_\_\_\_\_

7<sup>th</sup> Period Teacher: \_\_\_\_\_

**OFFICE USE ONLY**

APPROVED \_\_\_\_\_

DISAPPROVED \_\_\_\_\_