

3122F1
Students

West Valley School District
_____ **Elementary School**
Pre-arranged Absence Form

Date: _____

Student Name: _____ Grade: _____

Teacher: _____

Dates of Absence: From _____ to _____

Days of school missed: _____

Reason for Absence:

Parent/Guardian Signature: _____ Date: _____

Subject	Performance Level	Comments
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Effect of absence on student's progress:

Teacher Signature: _____ Date: _____

Based on the above information, the student's current academic achievement, and the potential negative results of this absence, the request is:

Accepted, Excused _____

Denied, Not Excused _____

Principal Signature: _____ Date: _____