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| **Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date(s) of Absence:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Parent Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Principal Signature:**(Not for field trip, only for vacation, college day, and other)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **UHS - Preplanned Absence Form** **updated July 2012*****Copy to Secretary prior to absence*****\*\* except Field Trip - Copies to Teachers** \*\* |
| Preplanned absences ***must be approved by the Principal in advance*** and students are responsible for getting homework from their teachers **prior to leaving**. Student is responsible for processing of this form.Student is responsible for any work missed. If student is on fail list for the week, they will not attend activity.***DUE DATE ASSIGNED BY TEACHER FOR PREPLANNED ABSENCE!*** |
| **Type of Absence - Check one and complete** |
|  **Field Trip** - Teacher is responsible for planning of the field trip - copies to teacher and teacher provide listing of those attending to the secretary. ***Principal Signature not needed for field trip***. |
|  **Family Vacation** - Parent must contact Mr. Dorethy for approval prior to the vacation |
|  **Other** - (List details)  |
|  **College Day** Name of College:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Length of Visit\_\_\_\_\_\_\_\_\_\_\_\_ Person Responsible for Transportation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***The following must be signed by a college representative to verify your visit.*** (Copy to sec. prior to visit - signed copy returned after visit.**Signature and Title of Person Verifying Visit:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Date Student Visited Your Campus:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **To Be Completed by all Teachers Prior to Attending Activity** |
|  | **Class** | **Assignment** | **Comments/DUE DATE OF ASSIGNMENT *(REQUIRED)*** | **Teacher** **Signature** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |
| **6** |  |  |  |  |
| **7** |  |  |  |  |
| **8** | **SH** |  |  |  |