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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** |  |  |  |