

Catharine Blaine K-8 School

PRE-PLANNED ABSENCE FORM

<u>Student 1 Name</u>	<u>Student 2 Name (sibling)</u>	<u>Student 3 Name (sibling)</u>
<u>Teacher's Name</u>	<u>Teacher's Name</u>	<u>Teacher's Name</u>
<u>Date(s) out of School</u>	<u>Date(s) out of School</u>	<u>Date(s) out of School</u>
<u>Reason Absent</u> (circle one) Medical Vacation Other Explain:	<u>Reason Absent</u> (circle one) Medical Vacation Other Explain:	<u>Reason Absent</u> (circle one) Medical Vacation Other Explain:

Parent/Guardian Signature: _____

Date Signed: _____

Catharine Blaine K-8 School

PRE-PLANNED ABSENCE FORM

<u>Student 1 Name</u>	<u>Student 2 Name (sibling)</u>	<u>Student 3 Name (sibling)</u>
<u>Teacher's Name</u>	<u>Teacher's Name</u>	<u>Teacher's Name</u>
<u>Date(s) out of School</u>	<u>Date(s) out of School</u>	<u>Date(s) out of School</u>
<u>Reason Absent</u> (circle one) Medical Vacation Other Explain:	<u>Reason Absent</u> (circle one) Medical Vacation Other Explain:	<u>Reason Absent</u> (circle one) Medical Vacation Other Explain:

Parent/Guardian Signature: _____

Date Signed: _____