Franklin HS - Attendance Correction Form

STUDENT completes:

First and Last Name ____________________________________________
Student ID# _________________________________________________
Date needing correction: ______________________________________
Class period needing correction: ________________________________
Reason for correction: _________________________________________

TEACHER/STAFF completes:

Staff Signature: ______________________________________________
Staff Print name: _____________________________________________

ATTENDANCE completes:

Verified with teacher: ___________ Entered: _________________