

**The Classical Academy Secondary School
Pre-Arranged Absence Form**

1. Complete Steps 1 – 3

a. Student Name: _____ Phone: _____

b. Date(s) of proposed absence: _____

c. Reason for absence: _____

d. Parent signature: _____

I understand that I am responsible for acquiring all assignments from all teachers. I understand that I ***must*** complete and return all assignments before the absence or on the first day of return to school as decided by each teacher.

Student's Signature

Date

2. Obtain all teachers' signatures

Period	Teacher	Concerns	Assignments	Due Date	Number Absences **
1					
2					
3					
4					
5					
6					
7					

3. Give the form to your front office for review by an administrator.

Date Received _____

Number of absences this semester _____

Administrator's Signature _____

Pre-arranged absences may be Excused or Unexcused. Also, please remember that students who are absent from a class more than 15 times during a semester risk not successfully completing the semester.