



Public Charter High School

REQUEST TO EXCUSE STUDENT ABSENCE

We understand that there are times when a student will need to miss school. Please use this form to document the reason for your student's absence from school.

This completed form (with supporting documentation, if required) should be submitted to the Correspondence Drop Box located in the main lobby within two (2) days of your student's return to school.

Please note that all absences (excused/unexcused) will count towards the Loss of Credit Absence Policy. *Five (5) absences (excused/unexcused) in any quarter in a particular class may result in an automatic loss of credit for that quarter in that class.*

Student's Name: _____ Date: _____

Grade (check one): Grade 9 Grade 10 Grade 11 Grade 12

Absence Date(s): _____ to _____

REASON FOR ABSENCE Please select only one (1) and provide required documentation.		
	Reason	Supporting Documentation Required
<input type="checkbox"/>	Illness	1-2 days – none needed 3 or more days – attach physician's note
<input type="checkbox"/>	Medical/Dental appointment	Attach appointment card from attending physician/dentist;
<input type="checkbox"/>	Legal appointment	Attach court documentation or other supporting documentation
<input type="checkbox"/>	OTHER	Please explain reason for absence in space below:

Parent/Guardian Signature: _____ Date: _____

Contact Number: (____) _____ - _____ HOME MOBILE OFFICE
 ----- FOR SCHOOL OFFICE USE -----

- ABSENCE EXCUSED
 Updated in EE
 Sent to QA Manager (if note from prior month)
 ABSENCE UNEXCUSED

School Official Signature: _____ Date: _____