Carlmont High School

**Student Temporary Absence from School (Including MISSING FINAL EXAMS)**

Instructions (please check off as completed):

This form is to be completed for any student who is planning an absence from school **longer than three school days** or **during finals week.**

* ***Student*** must fill in all student, class, assignment and exam information.
* ***Parent/Guardian*** must read and sign the absence form.
* ***Student*** must take the form to be signed by all affected teachers, his/her counselor, and deliver to the Principal’s Secretary, who will obtain Principal’s Signature and determination of warranted or unwarranted absence.
* ***Student*** must return the completed absence form to the Attendance Office before the planned absence so it can be entered into the system.

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| **Note: Parents/Guardians should be aware that missing class time and classwork may affect a student’s overall grade. It is the student’s responsibility to find out exactly what will be missed in each class and to communicate with each teacher as to when any assignments, labs or tests will be made up. Students are also responsible for learning the content that was missed during the absence.**  **If a final exam is missed for an unexcused absence, when and whether the final exam will be scheduled to be made up will be at the teacher’s discretion.** |

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ID Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_\_\_\_

Temporary absence beginning \_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_. Student will return on \_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_

If you are planning to be absent during finals, please check the days you will miss below.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Final Day 1:** | minimum day + 6th period | \_\_\_\_\_ | **Final Day 3:** | AM- Period 2 | \_\_\_\_\_ | **Final Day 4:** | AM- Period 4 | \_\_\_\_\_ |
| **Final Day 2:** | AM- Period 0 \_\_\_\_\_ |  |  | PM- Period 3 | \_\_\_\_\_ |  | PM- Period 5 | \_\_\_\_\_ |
|  | PM- Period 1 \_\_\_\_\_ |  |  |  |  |  |  |  |

Explanation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian:

I have read this form and am aware of the following points 1.) that extended absence or missing the final exam may affect my student’s overall grade, and 2.) that it is my student’s responsibility to communicate with his/her teacher in regards to making up any work or the final and 3.) in the case of unexcused absences, it is the teacher’s discretion to allow and schedule a makeup final.

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student’s Plan for Making up Work and/or Final Exams**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Prd.** | **Class** | **Assignments to be completed** | **Tests/Labs to be**  **made up** | **Time and Date** | **Teacher’s Signature and any comments/ testing notes** |
| 0 |  |  |  |  |  |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |

Other class notes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Counselor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  *(Counselor will make copy for student to keep)*

Principal’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(Student should take signed original from Principal to Attendance)*

Warranted \_\_\_\_\_\_\_\_\_\_ Unwarranted \_\_\_\_\_\_\_\_\_\_ Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_