

Athens Area Schools

4320 K Drive S – East Leroy, MI 49051
(269) 729-5427

Richard P. Franklin, Superintendent
www.athensk12.org

Form 5200.01 Request for Excuse of Pre-Arranged Absence

Student's Name _____
Grade Level _____
Date/s of Requested Absence _____
Date Submitted _____

If less than one week prior to date requested, include explanation:

Reason/Type of Absence (circle one or explain, if "other")

1. Scheduled medical appointment or recovery period*
2. Scheduled court appearance*
3. Scheduled professional appointment*
4. Funeral or memorial service**
5. Religious holiday**
6. Other good cause acceptable to the superintendent:
 - a. Family vacation
 - b. Trip with youth organization
 - c. Reward trip
 - d. College visit
 - e. Needed for work at home
 - f. Educationally related non-classroom activity
 - g. Other: _____

*Attach verification from provider's office or clerk of court.

**Attach note from parent verifying relationship, arrangements, or name of observance.

For any absence under number 6 (above), please include brief details, tell why this opportunity is requires the student to miss school and why the absence is outweighed by the educational value of the activity.

Tentative Approval (principal initial) _____

Teacher Recommendation (student list each teacher, teacher check and initial)

	Recommended	Not Recommended	Initials
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Final disposition by principal (check):

___ approved

___ denied

Sign _____ Date _____

Keep original for student's attendance file. Return photocopy to student/parents.