

Fellowship Academy Family Activity Absence Request Form

(Please fill out one request PER STUDENT TWO WEEKS PRIOR TO ABSENCE)

Name of Student _____ Grade _____
Today's Date _____ Parent Email _____
Date Leaving _____ Date Returning to School _____

In order for a student to be granted approval from the Administration to go on a family activity during school time, the following steps must be completed before a decision is made.

STEP 1 TO BE COMPLETED BY THE PARENT

Once completed please return the Absence Request Form to the office for consideration. The Administration will email the parent once a decision has been made.

1. I / We understand that the Administration will not make a decision to grant permission until this form is completed.
2. I / We understand that my child is only allowed to miss a maximum of five days for a family activity.
3. I / We understand that if permission is granted, my child's homework assignments are due in their entirety on the first day the student returns to school. Failure to provide the assigned homework on the first day back to school will result in all of the student's absences being counted as "unexcused". It is the responsibility of the student to turn in their homework on the first day.
4. I / We understand that if permission is granted, that I will comply with the terms of this agreement.
5. I / We understand that if permission is NOT granted and that if I choose to take my student on a family activity, all absences will be UNEXCUSED.

Parent's Signature _____ Date _____

STEP 2 TO BE COMPLETED BY THE TEACHER

Please check one:

_____ This student is making adequate academic progress and I do not believe the student's academic performance will suffer as the result of a family activity.

_____ This student is NOT making adequate academic progress and I believe that the student's academic performance will suffer as the result of a family activity.

Teacher's Signature _____ Date _____

STEP 3 TO BE COMPLETED BY THE ADMINISTRATION

Check all that apply:

_____ The family has requested permission two weeks prior to departure.

_____ The student will NOT be gone during PSAT or Terra Nova testing.

_____ Permission has been granted for this student.

_____ Permission has NOT be granted for this student.

Reason _____

Administrator's Signature _____ Date _____