



### Extended Absence Request Form

This form is to be completed and submitted to the office at least one week prior to your proposed extended absences of 3 or more days. Not submitting this form may result in absences not being excused.

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Dates will be absent: \_\_\_\_\_

Reason for absence: \_\_\_\_\_

Parent Name & Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent confirms that the MAT Absence Request form has been completed and submitted to the office.

This form should be signed by each of your teachers with whom you have classes during your proposed extended leave period. Completing this procedure indicates that you have spoken to your teachers regarding your absences, discussed the possible effects of the absences and to collaboratively make arrangements.

	<b>Class / Subject</b>	<b>Teacher Signature</b>	<b>Teacher Comment</b>
Teacher	_____	_____	_____
Teacher	_____	_____	_____
Teacher	_____	_____	_____
Teacher	_____	_____	_____
Teacher	_____	_____	_____
Teacher	_____	_____	_____
Teacher	_____	_____	_____
Teacher	_____	_____	_____

This Extended Absence Request Form is completed and received by the Office on \_\_\_\_\_.