

BOYERTOWN AREA SCHOOL DISTRICT
Boyertown, Pennsylvania 19512

SECONDARY
APPLICATION TO BE ABSENT FROM SCHOOL FOR
AN EDUCATIONAL TRIP OR TOUR

Parents:

Please complete the following information and submit to your building principal at least 2 days in advance of any planned educational trip. Please complete this form for each school age child involved in the trip. Thank you.

To be completed by parent:

Student's Name _____ Birth Date _____
 Grade/Section _____ Phone No. _____ (home) _____ (work) _____
 Requested Dates of Absence _____
 Nature and Reason for Absence _____
 Educational Benefits to be Derived _____

I certify the above information to be correct and understand the Boyertown Area School District Excused Absence Agreement.

_____ Date of Application _____ Signature of Parent/Guardian _____

To be completed by student:

BOYERTOWN EXCUSED ABSENCE AGREEMENT

I have seen all of my major teachers and have received the work required in each of my courses. I understand that all of this work must be handed in to my teachers at the date specified following my return to school. Work not handed in will have a negative effect on grades.

Dates of Absence _____ Student Signature _____

Makeup work including tests must be completed by _____
 (No later than 3 school days after returning to school)

Teachers:

Subject	Initials*	Subject	Initials*
<u>Language Arts</u>	_____	_____	_____
<u>Math</u>	_____	_____	_____
<u>Social Studies</u>	_____	_____	_____
<u>Science</u>	_____	_____	_____

*Teachers' initial indicate that they are aware of the requests and have provided assignments. Teachers should speak personally with the principal if they have concerns regarding this request.

FOR OFFICE USE ONLY

Student # _____
 Date Application Received _____ Number of Student Absences to Date _____
 Approved _____ Comments: _____
 Disapproved _____
 _____ Date _____ Signature of Principal _____

White – Parent Copy
 Yellow – Attendance Office Copy

Rev. March 2008