BOYERTOWN AREA SCHOOL DISTRICT Boyertown, Pennsylvania 19512

ELEMENTARY 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.

Also, during your approved trip, we ask that your child (children) record information about his/her daily experiences which should be given to the teacher upon return. Parents may assist as necessary. Include information such as places visited, highlights and reasons why other students would like to visit there. Brochures, pamphlets and pictures may also be included. In most cases, the report will be shared with the class. It is understood that class assignments missed by pupils while on the trip will be made up.

Student's Name		Birth Date			
Grade/Teacher		_ Phone No	(home)	(work)	
Requested Dates of Absence	<u> </u>				
Nature and Reason for Abse	ence				
Educational Benefits to be I	Derived				
I certify the above inform Absence Agreement.	ation to be correct an	nd understand th	e Boyertown Area Schoo	ol District Excused	
Date of Application			Signature of Parent/Guardian		
			_		
		R OFFICE USE ONLY			
Approved Disapproved	Comments:	Number o		Excused Unexcused Tardiness Ed. Trips	
Date			Signature of Principal		

White – Parent Copy

Yellow - Attendance Office Copy

Pink - Teacher Copy