## **BOYERTOWN AREA SCHOOL DISTRICT** Boyertown, Pennsylvania 19512

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

Parents:					
			your building principal at pol age child involved in the		
To be completed by par	ent:				
Student's Name			Birth Date		
Grade/Section	Phone No		(home)		(work)
Requested Dates of Abs	sence				
Nature and Reason for	Absence				
Educational Benefits to	be Derived				
I certify the above infor Agreement.	mation to be corn	rect and understa	and the Boyertown Area S	chool District Exc	used Absence
Date of Application Signature of Parent/Guardian					
To be completed by stu		ERTOWN EXCUSE	CD ABSENCE AGREEMENT		
			quired in each of my courses.		
Dates of Absence			Student Signature		
Makeup work including (No later than 3 school days a	g tests must be co	ompleted by			
Teachers: Subject Language Arts Math Social Studies Science			Subject	Comment	Initials*
*Teachers initial indicate that if they have concerns regardi		e requests and have j	provided assignments. Teachers	should speak personal	ly with the principal
		FOR OFFI	CE USE ONLY		
Student #					
Date Application Received Comments: Disapproved Comments:			Number of Student Absences to Date		Excused Unexcused Tardiness Ed. Trip
Date			Signature of Principal		

White - Parent Copy Yellow - Attendance Office Copy