

Justifiable Absence Request

If you would like the Absence Committee of Pacific Grove Middle School to consider approving an absence which is not permitted by the student handbook, please fill in the form and return it to the Attendance Office **at least one week prior to the date(s) of the requested absence.**

Student Name: _____ Grade: _____

Date(s) of requested absence: _____

Please explain why this activity cannot take place during non-school days.

Is there an educational value of this activity? Please explain.

Parent Name – PLEASE PRINT

Parent Phone Number

List Your Classes & Teachers

Teacher Selected Option

	<i>(to be filled in by each teacher)</i>
Period 0: _____	_____
Period 1: _____	_____
Period 2: _____	_____
Period 3: _____	_____
Period 4: _____	_____
Period 5: _____	_____
Period 6: _____	_____
Period 7: _____	_____

For Office Use Only:

Date Received: _____

Number of absences to date: _____ Excused: _____ Unexcused: _____

Committee Decision:

This absence is excused and work may be made up for full credit _____

This absence is not excused and teachers should not assign work or give credit for missed work. _____