GRANT PARK HIGH SCHOOL

<u>Student Travel Absenteeism Form</u> (3 or more days)

Name_____ Grade 7 8 9 10 11 12 **Today's date:** _____

School days to be missed:_____**Total Absences:** _____

Reason for Travel: (circle)   *Sport Competition*   *Family Holiday*   *Family Emergency*   *Other*

Special permission is required from the school Administration for all absences during the final exam periods

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Please read:

We encourage all students to attend classes to the best of their abilities. We do understand that in some cases students need to be away, however, parents and guardians need to be aware that extended absenteeism may affect the student's learning and grades. Please avoid travel <u>during exam times</u>. Completion of this letter communicates that students and parent(s)/guardian(s) agree to the provisions.
Please read and initial the three statements below:

1.   I understand that I will need to meet with my teachers <u>prior to my departure</u> to inform them of my upcoming absence, and to create a school learning plan.

2.   I accept the responsibility to complete all requirements of the learning plan.

3.   I understand that not following the learning plan may have a negative impact on my academic progress.

_____   _____

Student Signature   Parent/Guardian Signature

_____   _____

Date   Administrative Signature
(once the learning plan is complete)

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	Subject	Teacher	Teacher Initials	School Learning Plan	Teacher has academic concerns
A					☐ Yes ☐ No
B					☐ Yes ☐ No
C					☐ Yes ☐ No
D					☐ Yes ☐ No
E					☐ Yes ☐ No
ZZ					☐ Yes ☐ No