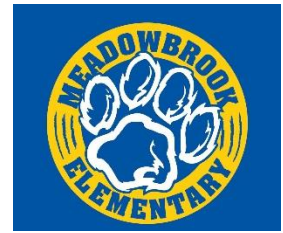




Pre-Planned Absence Form



Please provide the following information to assist the school attendance officer in determining whether your child's proposed absence shall be excused:

Student Name: _____

Grade: _____ Homeroom Teacher: _____

Parent/Guardian Name: _____

Address: _____

Phone: _____

Dates of planned absence: _____

Destination: _____

I certify that this information is true and correct. I understand that it is my responsibility to arrange for any make-up work and that certain activities and lessons may be impossible to make-up, such as field trips, labs, guest speakers, class discussions, etc.

Parent/Guardian Signature

Teacher Signature

We appreciate the advance notification of your student's absence. This is your notice that Wisconsin State Law states that a child excused in writing by his or her parent or guardian must complete any course work missed during the absence, and may not be excused for more than 10 days in a school year under this provision, **Wis. Stat. Sec. 118.15(3) (c)**. Any absence exceeding 10 days (including Preplanned or Excused Absences) in a school year will require a medical excuse. We are aware that sometimes it may be necessary to miss school due to unavoidable events and suggest, when possible, to try to plan these events outside of school to avoid any unnecessary absences.

OFFICE USE:

Days absent to date: _____

This absence is _____ Approved

Administrator Signature

Date: _____