



EHS Pre-Approved Absence Notification



Please use this form when a student will be absent for more than 2 days.

Student Name: _____ Student ID: _____ Grade: _____

has requested permission to be absent on the following days: _____

Process for approval: Failure to complete all of these steps will result in denial of the excused absence.

1. **Pre-Approved absences will need to be completed and turned in 5 days prior to the requested date of absence.**
2. The student must **attach a letter** explaining the reason for the request (refer to Code of Conduct for acceptable excused absences) signed by parent/guardian with contact number.
3. The student will bring this form to all of their teachers. Teachers will use this form to provide any relevant information in the comment box.
4. Administrators **may** deny excused absence request for any of the following reasons:
 - The request is not one of the approved reasons as stated by DCPS.
 - The student has less than a 70% in the class.
 - The student has missed more than 15 days of school (excused or unexcused) this school year.
 - The student has been suspended for any reason this school year.

*Lastly it is the **students' responsibility** to make up any work they miss in the time frame provided. *

Course	Teacher's Signature	Current Grade	Comments
1A			
2A			
3A			
4A			
5B			
6B			
7B			
8B			

Parents complete below **AFTER** all teacher signatures have been received.

I am the parent/guardian of this student and having been informed of his/her academic standing, I feel this absence is warranted.

Parent Signature: _____ Phone Number: _____ Date: _____

Internal use only:

Administrator Signature: _____ Date: _____ Excused **OR** Unexcused