

Excused Absences for Educational Travel

Student's Name _____

Homeroom Teacher _____

Date(s) of Trip _____

(maximum of five school days)

Reason for Request _____

Destination _____

Parent(s) or Persons(s) who will accompany your child _____

(Parent/Guardian Signature)

(Date)



Office Use Only

Number of days absent this school year: _____

Average grades in content areas: _____

_____ The criteria have been met. I approve this educational trip.

_____ All of criteria have not been met to approve educational travel.

I cannot approve this trip for the reason stated below:

(Principal's Signature)

(Date)