

Lopez Island School District #144

86 School Road Lopez Island, WA 98261 Phone 360-468-2202 Fax (360) 468-2212 www.lopezislandschool.org

Mary Fordham, Elementary Principal Martha Martin, Secondary Principal Ed Murray, Superintendent

PRE-ARRANGED ABSENCE FORM FOR LOPEZ ELEMENTARY SCHOOL

A copy of this completed form must be submitted to the office the day before departure.

| Student Name: | Grade: |
|--|---|
| (Please Print F Date(s) of planned absence: | Full Name) |
| Purpose of absence: | |
| Parent/guardian signature: | Date: |
| duplicated. In all such cases prior arrangement student is required to complete class work l | de students with valuable educational exposure, which the school cannot ts are to be made with the school for the period of the absence and the by assigned due date. The pre-arranged absences may be considered dverse effect on the student's educational progress RCW28A.225.010(d). |
| ASSIGNMENTS TO BE COMPLETED WHILE AB | <u>BSENT</u> |
| Literacy Teacher: D s it likely the requested absence will have an adverse ef Yes or No (circle one) Assignments: | ffect on achievement during this grading period? |
| Math Teacher: Date is it likely the requested absence will have an adverse effector No (circle one) Assignments: | ffect on achievement during this grading period? |
| Science Teacher: Dat is it likely the requested absence will have an adverse ef Yes or No (circle one) Assignments: | fect on achievement during this grading period? |
| | (Please backside if needed) |



| DISTRICT ONLY: This pre-arranged absence will be considered: Comments: | □ Excused | □ Unexcused |
|--|-----------|-------------|
| Comments. | | |
| Administrator's signature: | Date: | |