

Lake Center Christian School
12893 Kaufman Avenue, Hartville, OH 44632
330-877-2049

JH/SH PLANNED ABSENCE FORM

Planned absences include family trips, family vacations and college visits. A Planned Absence Form is to be filled out and **submitted to the office at least two (2) days prior to the absence**. For a family trip or family vacation to be excused, a parent must accompany the student on the trip. Students may visit colleges with a parent or an adult designated by the parent.

Family Name _____ E-mail Address _____

Student(s) Name/Grade _____ / _____ / _____ / _____

Date(s) of Absence _____ Day(s) of Absence _____ Date Submitted _____
(i.e. 9/5 – 9/7) (Wednesday-Friday)

Reason: _____ Family trip/vacation _____ College visit _____ Mission/Church trip _____ Other (specify details below)

Please specify the destination of trip and who is going along:

Missed work: The Planned Absence Form must be completed, turned in **at least 2 days in advance**, and approved by administration for credit to be given for missed student work. **When requested at least 1 week in advance**, teachers will attempt to give students assignments and reading materials prior to the planned absence, but are not required to do so. In such cases the work will need to be made up after the absence. Lessons taught while the student is on a trip, vacation or college visit will *not* be re-taught by the teacher.

Please list all the teachers who need to be notified of this planned absence.

Student 1

Student 2

Student 3

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

1. _____
2. _____
3. _____
4. _____
5. _____
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1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____

Planned absences will not be approved or excused during the last week of a semester for grades 7 – 12. Planned absences are not to exceed 5 consecutive days or 10 total days during the year. If total days absent exceed 10 days, *Saturday School* would be required. Planned absences usually are not approved for students who have already been absent more than 6 days during the semester; this will be at the Principal's discretion.

Parent Signature _____

Office Use Only

Date received _____ / _____ / _____

Date copies distributed to teachers _____ / _____ / _____ Distributed by _____

Days missed 1st Semester/2nd Semester:
 _____ / _____ / _____ _____ / _____ / _____

Student _____	Days missed _____	Student _____	Days missed _____	Student _____	Days missed _____
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Secondary Principal's Signature _____ Date Approved _____