

**St. Luke's School
Anticipated Absence Form**

Student's Name: _____

Date(s) of Intended Absence: _____

Reason for Absence: _____

St. Luke's School discourages unnecessary absences, as daily class work can never be truly replaced by work done outside class. If a student is absent for reasons other than illness or family emergency, our teachers are NOT expected to prepare work for the student ahead of the absence or help the student make up work missed due to the absence **UNLESS** the planned absence is 'approved' by the school. Specifically, this form must be signed by the parent(s) or legal guardian(s) and turned in to the Head of School at least seven (7) school days before the departure date.

Policy details regarding planned absences are found in the Student/Parent Handbook (#9. Extended Absence Policy for Vacations). By signing this form, you, the parent(s)/legal guardian(s), declare that you wish your child to be absent from school on the dates indicated and are agreeing to the conditions of student absence as outlined in that policy.

Signature of parent(s) or legal guardian(s): _____

Date: _____

Head of School's signature: _____

Date: _____

Teachers will not give assignments until the Head of School has signed this form.

Class: _____ **Teacher signature:** _____

Assignment(s): _____

Class: _____ **Teacher signature:** _____

Assignment(s): _____

Class: _____ **Teacher signature:** _____

Assignment(s): _____

(turn over)

Class: _____ **Teacher signature:** _____

Assignment(s): _____

Class: _____ **Teacher signature:** _____

Assignment(s): _____

Class: _____ **Teacher signature:** _____

Assignment(s): _____

Class: _____ **Teacher signature:** _____

Assignment(s): _____

Class: _____ **Teacher signature:** _____

Assignment(s): _____

Class: _____ **Teacher signature:** _____

Assignment(s): _____

Class: _____ **Teacher signature:** _____

Assignment(s): _____