

SEATTLE PREPARATORY SCHOOL
NOT SCHOOL RELATED
ABSENCE PERMISSION FORM

STEP ONE	
Student Name: _____	Grade: 9 10 11 12
Date(s) of Absence: _____	
Number of days of school missed: _____	
Reason for Absence: _____	
I have read the Attendance Policy in the Parent/Student Handbook and give my permission for my daughter or son to be absent from school for _____ day(s).	
Parent/Guardian Signature: _____	
Parent Email Address: _____	

STEP TWO		
The student must take this form around to his/her teachers in advance of the absence to receive a comment from each of the teachers. The "Teacher Comments" section should be closely reviewed by the parent and the student. The student is responsible for contacting all of his/her teachers about make-up work if the absence is approved.		
Course	Teacher Name	Teacher Comments/Initial
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

STEP THREE
For all absences exceeding two days, the Assistant Principal of Academics' approval is required below.

Assistant Principal for Academics (Jenell Kheriaty)

STEP FOUR
PLEASE RETURN THIS FORM TO Mrs.Fields in the MAIN OFFICE/ATTENDANCE AT LEAST TWO DAYS PRIOR TO DATE(S) OF ABSENCE. Mrs. Fields will forward a copy to the Counseling Office. A copy will also be emailed to the parent address provided above or mailed home to the parents if no email address is provided.