## LAKES INTERNATIONAL LANGUAGE ACADEMY

## **Pre-Arranged Absence Form**

Student Name:	
Teacher Name:	Grade:
We, the parents of the student named from school for the following reason:	above are requesting that he/she be excused
Date (s) student will be absent:	,
(Parent Signature)	(Date)
Students: You are responsible to mal	ke up the work missed during your absence.
This form should be:	
<ul> <li>filled out by your parent befor</li> <li>returned to your classroom teach</li> <li>signed by your classroom teach</li> </ul>	acher.
Failure to communicate a vacation wi considered <u>unexcused</u> .	ith the school will result in the student to be
Additional copies of this form are ava	ilable through your child's classroom teacher.
(Teacher Signature)	( Date)