

REYNOLDSBURG CITY SCHOOLS



Pre-Authorized Planned Absence Form

Date: _____

1st trip/vacation

2nd trip/vacation

Student Name: _____ Grade/ Teacher: _____

Reason for Absence: _____

Last day of attendance: _____

Expected return date: _____

Please read before signing at bottom:

- **I understand that this form MUST be turned in PRIOR to the trip/vacation.**
- I understand that my child is allowed ONE planned trip/vacation of up to 30 consecutive hours (5 days) absent from school each year.
- I understand that this document is to notify the school of my child's non-emergency trip/vacation. The time missed will be documented as excused absences **when this form is received.**
- I understand that my student is allowed a 2nd trip/vacation of up to an additional 30 consecutive hours (5 days) if requested through this document.
- If NOT approved for additional hours (2nd trip/vacation), these additional hours will be marked UNEXCUSED and count toward truancy.
- I agree that my child will complete and turn in all assigned schoolwork and tests to his/her teacher within the *equivalent / same* amount of days my child missed (3 days absent = 3 days to turn in make-up work, test, etc.).
- I understand that my child's grades will be calculated through the completion of assigned work and tests.
- I understand the Reynoldsburg City Schools Board Policy regarding school absences as printed in the Student Handbook.

Parent/Guardian Name: _____ Phone Number: _____

Parent/Guardian Signature: _____

Superintendent/Designee Signature

Date

Approved for
Excused Absence

****Please return completed form to the student's teacher.**