

Scheduled Absence Plan

A two-week notification is required. Scheduled Absence Plans are not required for absences due to illness.

Student(s)' name _____

Dates of absence _____

Number of school days absent _____

Does scheduled absence include mandatory testing dates? _____

Reason(s) for absence _____

Phone numbers parents can be reached at _____

Names of Student(s)	Grade	Homeroom Teacher
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

I, _____ agree to assist JICES staff in the preparation
Parent/Guardian Name
of materials for my child(ren). This may include photo copying necessary materials. All homework will be completed and returned by _____, as agreed upon per
To be completed by JICES staff
conversation with school administrators.

Parent's signature Date

Principal's signature Date

Days excused _____ Days Unexcused _____
Dates: Excused _____ Unexcused _____

Office Use Only

School Copy

Teacher Copy
Given ___/___/___

Parent Letter
Given ___/___/___

Absences SYTD _____

Entered in I.C.
Given ___/___/___

08/09/2013

Tardiness SYTD _____