

Trinity Lutheran School  
Student Planned Absence Request

Student Name \_\_\_\_\_ Grade \_\_\_\_\_

Dates for Requested Absence \_\_\_\_\_

Reason for Absence \_\_\_\_\_  
\_\_\_\_\_

**Please choose one:**

\_\_\_\_\_ My student will complete any available homework before returning to school.

\_\_\_\_\_ My student will complete missed work upon returning to school.

Parents/Guardians understand that Trinity Lutheran School does not condone planned absences. These absences are counted as unexcused absences. Parents/Guardians agree that the student is responsible for completing missed assignments, making up missed projects and tests, and catching up with the class upon return. Teachers are not required to provide every assignment in advance. Classroom assignments can/do occasionally change from the original plans. See the Family Handbook for details on Planned Absences and Make-up Work.

Parent/Guardian Signature

Date

\_\_\_\_\_

\_\_\_\_\_

**Teachers: Please sign as acknowledgment of receipt of this form and indicate homework availability.**

Teacher \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Homework/assignments/tests will be available early.

\_\_\_\_\_ Homework/assignments/tests will not be available early.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student's Current GPA \_\_\_\_\_

**My signature is acknowledgment of receipt of this completed form.**

Mrs. Thompson, Director

\_\_\_\_\_ Date \_\_\_\_\_