

MOUNT GILEAD HIGH SCHOOL

PREARRANGED ABSENCE

This is to certify that _____

has my permission to be absent from school on _____

for the reason of _____

Parent's Signature

**This form must be turned in to the office 2 school days prior to the absence.
All work missed is due immediately upon return to school.**

This form must be signed by each teacher, the Building Principal or Dean of Students, and the Guidance Counselor acknowledging that they have been informed of student planned absence. **It is the student's responsibility to get all assignments for work missed and have all work completed and turned in on date of return to school.**

BLOCK

A _____

B _____

L _____

C _____

D _____

Dean of Students / Principal

Guidance Counselor