

**CAROLYN WENZ SCHOOL
ANTICIPATED ABSENCE**

Name _____ Date _____

Will be absent for the following day(s): _____

Reason for Absence: _____

Type of Absence: _____ School Function _____ Anticipated _____ Medical

All parents and students should be familiar with the Wenz attendance policy pages in the School Handbook. This anticipated absence form will not change the handbook policy.

Teachers will provide assignments for the time the student will be absent. However, there is no substitute for class instruction since certain types of class activities, such as discussions or experiments, are not possible to reproduce. Make-up work is due the day the student returns to school.

Procedures: This form must be given to your teacher. Your teacher will sign this form which will indicate to the office that she is aware of your anticipated absence.

Subjects missed	Signature of teacher
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____

This form is to be completed and returned to the office prior to the day of absence.

Student signature & date

Parent signature & date