

# TJMS PRE-EXCUSED ABSENCE for SCHOOL ACTIVITY

Student: \_\_\_\_\_ Grade: (circle one) 5 6 7 8  
FIRST NAME and LAST NAME

Date(s) of anticipated absence: \_\_\_\_\_

Reason for anticipated absence: \_\_\_\_\_

I, the parent/guardian of the above named student, request a pre-planned excused absence for my son/daughter. I understand that the excused absence will be for a school activity. The teacher will have the option to request that work be done prior to the pre-planned excused absence or upon the student's return. ***This form must be turned in TO THE SUPERVISOR OF THE ACTIVITY prior to the activity or the student will not be able to participate.***

**Signature of Parent/Guardian**

**Signature of Student**

| Period | Subject | Tchr Initials | Assignment / Comments |
|--------|---------|---------------|-----------------------|
| 1      |         |               |                       |
| 2      |         |               |                       |
| 3      |         |               |                       |
| 4      |         |               |                       |
| 5      |         |               |                       |
| 6      |         |               |                       |

**Student:** After completion of this form, you must return it to the supervisor of the activity.

\_\_\_\_\_  
Supervisor of Activity

\_\_\_\_\_  
Initials of Supervisor (confirms the student is able to participate)