THE HUDSON SCHOOL
ANTICIPATED ABSENCE FORM

For office to complete:
Date form received:_____
Initials office staff:_____

Students: If you know **in advance** that you are going to have to miss school for any reason (i.e. - family plans, college visits, doctor's appointments, etc.), please use this form to gather assignments from all teachers whose classes will be missed ***and also*** to inform the main office that you will be missing school.

INSTRUCTIONS:

1. Complete the student information section below.
2. Ask your teachers to indicate below that you have informed them of your absence and gotten your assignment by signing the sheet. They may also use this sheet to inform you of your assignment. (Out of courtesy to teachers, please allow yourself sufficient time to complete the form. A week is usually best.)
3. *Your parents must sign the form for it to be valid.*
4. *The Head of School, Student Support Counselor or your Academic Advisor/Homeroom teacher must sign the form for it to be valid.*
5. ***You must turn in the completed form to the main office***. If possible, please turn it in at least three days before your absence.

STUDENT INFORMATION

Student's Name_____ **Student's Grade**_____

Homeroom Teacher and/or Advisor's Name_____

Date(s) of Absence_____ **Length of time requested**_____

Reason for requested absence:_____

_____

_____

SIGNATURE SECTION

_____

Parent's/Guardian's Signature **Director, Advisor, or Counselor Approval Required**

TEACHER SECTION

Teachers' Names	Assignments to be completed during absence	Signature