

DeForest Area Middle School

Prearranged Absence

*Completed form must be turned in prior to absence *

Student Name _____ Grade _____

Dates to be gone from classes' _____

Reason for absence _____

***** It is the student's responsibility to contact teachers for making up missed work /tests during their absence. Student's, who miss classes for reasons that are determined to be excused, will be given the opportunity to make up work missed when they return to school. Teachers will be asked to grant the number of days absent for make-up time.**

Hour 1 class: _____
Assignments/Comments: _____

Teacher: _____

Hour 2 class: _____
Assignments/Comments: _____

Teacher: _____

Hour 3 class: _____
Assignments/Comments: _____

Teacher: _____

Hour 4 class: _____
Assignments/Comments: _____

Teacher: _____

Hour 5 class: _____
Assignments/Comments: _____

Teacher: _____

Hour 6 class: _____
Assignments/Comments: _____

Teacher: _____

Hour 7 class: _____
Assignments/Comments: _____

Teacher: _____

Hour 8 class: _____
Assignments/Comments: _____

Teacher: _____

Parent/Guardian Signature _____ Date _____

Assistant Principal Signature _____ Date _____