



Pre-Excused Absence Request

I request that my child/ren be excused from St. John the Baptist School on the terms described below.

Child/ren	Grade	Homeroom
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Date(s) of absence: _____

Reason for absence: _____

I understand that my child will be responsible for completing class assignments and/or assessments that will be missed during this absence.

(Parent/Guardian Signature)

(Date)

(Administrator Approval)

Office Only:

- Original on file
- Copy to homeroom teacher
- Copy returned to family