

## PRE-PLANNED ABSENCE APPROVAL FORM.

Student Name:		Grade:
Dates of planned absence	(s)	Total # of days
Reason for absence(s):		
Pre-Planned Absence Polic	y as Defined in the CCCS I	Handbook:
the student to obtain make-up we the principal, at least one week p website. If this form is not co- student's absence may not be give	ork from the teachers. Students a prior to their absence(s). This for implete and approved before the ven credit. It is the student's res- ceed the ten-day absence restric	ned absences (trips, family vacations, etc.) to allow must submit a Planned Absence Form, approved by mis available in the school office or on the school e student's departure any work missed during the ponsibility to make up all work missed. If planned tion, the school administration reserves the right to
Additionally, please the fol	lowing legally mandated A	bsence Policy:
"Ten (10) absences are allowed egold days per semester); After te	each semester (due to block sche n absences, the student may not	duling – that would only allow 5 blue days and 5 receive credit for the course."
In signing this form, I confi	irm that I have read and agr	ree to uphold the Pre-Planned Absence
Policy and the general Abse	ence Policy as detailed on t	his form. I understand that if my student
exceeds 5 blue absences or	5 gold absences they may	not receive credit for their courses.
	•	
Parent Signature	Date	
	•	
:	•	
School Administrator	Date	
•		4

Our mission is to honor God by providing academic excellence while encouraging students to effectively integrate
Biblical truth into their daily lives and impact the culture for Christ.

