

PRE-APPROVED ABSENCE FORM

MOUNT VERNON HIGH SCHOOL



Student's name: _____

Reason for Absence: _____

Date(s) of Absence: _____

Class Schedule: _____ Grade: (circle one) 12 11 10 9

Early Bird: Teacher Signature _____

Period 01 Teacher Signature _____

Period 02 Teacher Signature _____

Period 03 Teacher Signature _____

Period 04 Teacher Signature _____

Period 05 Teacher Signature _____

Period 06 Teacher Signature _____

Period 07 Teacher Signature _____

Parent/Guardian's signature _____ Date: _____

Arrangements for completing make-up work must be made with each instructor.
The instructor's signature above indicates that arrangements have been discussed.
Secure your parent/guardian's signature. Return form with signatures to main office.

Should you have questions, contact the main office at 895-8843.