WHITTIER ELEMENTARY

916 Oakes Avenue, Everett, WA 98201 Attendance Office: 425-385-4305 FAX: 425-385-4302

Student #1 Name: Student ID #: Grade:	Student ID #:	ne:	
Student #3 Name: Student ID #: Grade:	Student #4 Nam Student ID #:	e:	
Elementary Prea	rranged Absen	ce Form	
Families should not schedule vacations or to travel must occur while school is in sess the absence and approved by the principal Pursuant to district Procedure 3122P, the principal statement of the principal st	ion, it must be prearrange (or designee). orincipal (or designee) ma	ed prior to the first date of	
Assignments requested for a prearranged aparent/guardian if requested five (5) school learning activities/opportunities can be represented for absence:	absence will be provided to all days prior to the absence produced outside of the cl	e. Please note: Not all assroom.	
Date(s) of planned absence:			
Student #1 Teacher's name:			
Student #2 Teacher's name:			
Student #3 Teacher's name:			
Student #4 Teacher's name:			
<u>PARENTS</u>			
I have met/communicated with my student ways for my student(s) to complete request affect my student's learning and being prepared.	ted assignments. I am awa		
Parent/guardian signature	Date	Phone	
Administrator signature	Date	Number of days excused	
****OFF	ICE USE ONLY***		
Verified by:		Date:	

☐ In person

☐ Email

☐ Phone/Fax