Woodside Elementary School  
17000 23rd Ave SE Bothell WA 98012  
Attendance Office: 425.385.7805 Fax: 425.385.7802  
Email: woodsideattendance@everettsd.org

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<thead>
<tr>
<th>Student #1 Name:</th>
<th>Student ID #:</th>
<th>Grade:</th>
<th>Teacher:</th>
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<th>Student #2 Name:</th>
<th>Student ID #:</th>
<th>Grade:</th>
<th>Teacher:</th>
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<th>Student #3 Name:</th>
<th>Student ID #:</th>
<th>Grade:</th>
<th>Teacher:</th>
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<th>Student #4 Name:</th>
<th>Student ID #:</th>
<th>Grade:</th>
<th>Teacher:</th>
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Elementary Prearranged Absence Form

Families should not schedule vacations or travel while school is in session. If a family vacation or travel must occur while school is in session, it must be prearranged prior to the first date of the absence and approved by the principal (or designee).

Pursuant to district Procedure 3122P, the principal (or designee) may excuse up to five (5) school days for a prearranged absence per student each school year.

Assignments requested for a prearranged absence will be provided to the student or parent/guardian if requested five (5) school days prior to the absence. PLEASE NOTE: Not all learning activities/ opportunities can be reproduced outside of the classroom.

Reason for absence: ________________________________________
__________________________________________________________________________
__________________________________________________________________________

Date(s) of planned absence: ____________________________________________
__________________________________________________________________________

PARENTS
I have met/ communicated with my student’s teacher(s) regarding this planned absence and ways for my student(s) to complete requested assignments. I am aware that this absence may affect my student’s learning and being prepared for the next grade.

____________________________________  ____________________  ____________
Parent/ Guardian Signature          Date          Phone

____________________________________  ____________________  ____________
Administrator Signature             Date          Days Excused  Days Unexcused

****OFFICE USE ONLY****

Verified by: ________________________________  Date: ________________________________
□ Phone/ Fax  □ In Person  □ Email