## MILL CREEK ELEMENTARY

3400 148<sup>th</sup> Street SE Mill Creek 98012 Attendance Office: 425-385-6803

Student #1 Name: Student ID #: Grade:	Student ID #:		
Student #3 Name: Student ID #: Grade:	Student ID #:		
Elementary P	rearranged Absence	Form	
Camilies should not schedule vacation ravel must occur while school is in sobsence and approved by the principal	ession, it must be prearranged p		
Pursuant to district Procedure 31: ive (5) school days for a prearran emaining absences will be consid	ged absence per student eac		
Assignments requested for a prearrang parent/guardian if requested five (5) so carning activities/opportunities can be	hool days prior to the absence. Pl	<b>lease note:</b> Not all	
Reason for absence:			
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:			
PARENTS .			
I have met/communicated with my stu ways for my student(s) to complete re- affect my student's learning and being	quested assignments. I am aware		
Parent/guardian signature	Date	Phone	

Date

Administrator signature

Number of days excused