



UPPER SCHOOL ABSENCE RELEASE FORM

The student named below is applying for permission to be absent for a reason other than illness. Please sign the form next to the course name indicating that the student has seen you for assignments and has your permission. The form will then be signed by the parents and returned to the Head of School before the date of absence.

Student's Name: _____ Grade: _____

Date(s) of intended absence: _____

Reason for absence: _____

COURSE NAME

TEACHER'S SIGNATURE

PLEASE OBTAIN SIGNATURES FROM THE FOLLOWING:

ADVISER: _____

PARENT: _____

COACH (if applicable): _____

DIRECTOR OF COLLEGE COUNSELING (for college visits): _____

DEAN OF STUDENT LIFE: _____

DIVISION HEAD: _____

HEAD OF SCHOOL: _____

ROUTE TO SCHOOL NURSE AFTER COMPLETION