



FREEPORT AREA SCHOOL DISTRICT

Request for Excused Absence from School For a Pre-planned Educational Tour or Trip

List the names, grades, and schools of all students who will participate in the tour or trip below.

Student Name	Grade	School Note: Parent/Guardian must submit this completed form to each of the schools listed below.

Date(s) of proposed absence: _____

Name and address of person(s) directing and/or supervising student during above absence:

Itinerary of trip *(include activities which are educational in nature and will provide the child with valuable experiences outside the classroom)*:

Classroom assignments are the responsibility of the student to obtain, preferably prior to departure. All assignments must be completed. Upon their return, students will be given the number of days to complete their assignments equal to the number of days absent.

I certify all of the above information to be true and agree to comply with the above conditions.

Signature of Parent or Guardian

Date

Email Address of Parent or Guardian: _____

FOR SCHOOL USE ONLY

Prior Requests: _____ Dates: _____

Determination: **Approved** **Conditional Approval** **Not Approved**

School Name: _____ Signature of School Official: _____