



Selah Intermediate School
 1401 W Fremont, Selah, WA 98942
 Phone 509-698-8300 ❖ Fax 509-698-8313

Pre-Arranged Absence Form

I am requesting that my student _____ grade _____ be approved for absence from school for the following date(s) _____. The reason for this absence is:

Parent Signature _____ Date _____ Phone _____

The Selah School District policy for pre-approved absences reads:

“This category of absence will be counted as excused for purposes agreed to by the principal and the parent/guardian. An absence may not be approved if it causes a serious adverse effect on the student’s educational progress. In participation-type classes, e.g., certain music and physical education classes, the student may not be able to achieve the objectives of the unit of instruction as a result of absence from class. In such a case, a parent or guardian approved absence would have an adverse effect on the student’s educational progress, which would ultimately be reflected in the grade for such a course. A student, upon the request of his/her parent/guardian, may be excused for a portion of a school day to participate in religious instruction provided such is not conducted on school property or otherwise involves the school to any degree.”

The student is responsible for acquiring appropriate teachers signatures and returning the completed form to the office.

Teacher’s approval – Is it likely that this student’s absence, as requested, will cause an adverse effect on the student’s overall grade?

Teacher’s Signature	Yes	No	Will schoolwork be provided?
Language Arts _____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Math _____	<input type="checkbox"/>	<input type="checkbox"/>	_____
Science _____	<input type="checkbox"/>	<input type="checkbox"/>	_____

Request Approved _____ Request Denied _____
 (Principal/Assistant Principal) (Principal/Assistant Principal)

Parent Notified _____ Notified by _____ Date/Time _____