

ADVANCE NOTICE OF ABSENCE (VACATION) BROOKSIDE HIGH SCHOOL

NAME ABSENT FROM:TO:		GRADE	DATE
		RETURNING ON:	
THIS FORM MUST BE TURNED IN	TO ATTENDANCE OFFICE	BEFORE LEAVING	
PERIOD 1			
TEACHER			
COMMENTS			
PERIOD 2			
TEACHER			
COMMENTS			
PERIOD 3			
TEACHER			
COMMENTS			
PERIOD 4 TEACHER			
COMMENTS			
Period 5			
Teacher			
Comments			
Period 6			
Teacher			
Comments			
PERIOD 7			
TEACHER			
COMMENTS			
STUDENTS HAVING PRIOR CONTRACTU COMPLY WITH SAID AGREEMENT.			
AS THE CUSTODIAL PARENT I UNDERSTA MY CHILD'S RETURN TO CLASS. I ALSO ACTIVITIES (TESTS, QUIZZES, ETC) WITH	O UNDERSTAND THAT MY CHIL	D IS EXPECTED TO BE ABLE TO CONTIL	
PARENT SIGNATURE	_		
PRINCIPAL SIGNATURE	DATE		
APPROVED / DENIED		Current Hrs. of Abse	nce:(for office)