## WEST CHESTER AREA SCHOOL DISTRICT EAST HIGH SCHOOL

## **ABSENCE REQUEST FOR FAMILY TRIP**

(Please Print)		
Student Name:	Grade:	Homeroom #:
Date of Request:		
I/We hereby request to take our child		, grade,
homeroom number, on a trip that	we conside	er to have educational value
during the regularly scheduled school time.		
The date(s) of the trip are		
The destination is		
In order for the faculty to have time to perform submitted to the Principal no fewer	-	-
It is understood by both the parents and the the above absence, and that it is the student the trip to determine homework and other a Homework and other assignments should be school in order to receive full credit for the session may be pre-approved by the grade of per school year.	t's responsib ssignments e returned v assignment	bility to check with each teacher prior to that may be due during the absence. within three (3) days of his/her return to ts. Family vacation while school is in
Parent's Signature		Date
Student's Signature		Date
Administrator's Signature		Date
(Administrator's signature is required prior to submi	itting form to	the Attendance office)