



# Excused Absences for Educational Trip - Permission Form

Please type or print clearly – to be filled out by student, teacher, parent/guardian and administrator

It is the view of the Riverview School District that a child’s education is a result of a partnership between and among the school district administration, teachers, parents/guardians and students. The school district feels that the attendance is critically important to effective learning; however, we acknowledge that at times absences are unavoidable. Hence, the district strongly urges you to provide opportunities which provide valuable growth and/or learning experience, which add to the student’s development and are (or can be) relevant to the student’s education during his/her absence.

1. Name of Student \_\_\_\_\_
2. Dates of School Absences \_\_\_\_\_
3. It is important the students make every effort to cover work on their own so that when they return to class they will be working on the same level with their classmates.

## ACKNOWLEDGMENT OF RESPONSIBILITY

As parent/guardian of the above named student, I (we) acknowledge the responsibility for encouraging and supervising the completion of all assignments which fall due during this absence from school.

\_\_\_\_\_  
Parent/Guardian Signature      Date

As a Riverview student, I acknowledge my responsibility to complete all assignments that fall due during this absence from school.

\_\_\_\_\_  
Student Signature      Date

As the student’s teacher, I have provided the list of assignments needed to keep the student up-to-date with class activities upon his/her return. I have also had an opportunity to answer the parent or student’s questions about those assignments.

\_\_\_\_\_  
Teacher Signature      Date

As the School Administrator, I have reviewed this request and find that I will provide sufficient educational content to allow the student to return to classes without disadvantage to that student or his classmates.

\_\_\_\_\_  
Administrator Signature      Date

Additional Suggestions for enriching the educational content of the absence:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Educational Absence Teacher Sign-Off Sheet

Student's Name \_\_\_\_\_ Date of Absence \_\_\_\_\_

PERIOD	CLASS	TEACHER SIGNATURE
1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____
6	_____	_____
7	_____	_____
8	_____	_____
9	_____	_____