Form 173JMS Rev. 3/2018

## Mt. Lebanon School District 155 Cochran Rd. Pittsburgh, PA 15228

| Date of      |  |
|--------------|--|
| Application_ |  |

## REQUEST FOR EXCUSED ABSENCES FROM SCHOOL FOR A PRE-PLANNED EDUCATION TOUR OR TRIP (One copy for <u>each</u> student)

| •  |  | (One copy for <u>each</u> st   | uaent)   |                                   |  |
|--|--|--|--|-----------------------------------|--|
| Student's Full Name  |  |  | Person directing/supervising student:                    |                                   |  |
| Grade  |  |  | Name   |                                   |  |
| Dates of Absence   |  |  | Address  |                                   |  |
| Total Number of Absent Days  |  |  | City/State/Zip Code                                      |                                   |  |
|  |  |  | Telephone Number   |                                   |  |
| 1. Pa<br>ab<br>2. Pro<br>3. To<br>4. All<br>Describe   | sence. A week's notice is e-approved absences will tal pre-approved absence pre-approved absences wour Pre-Planned Education | n the principal IN ADVANCE, or requested.  NOT be approved for standardizes during the school year will not will be recorded as an excused a con Tour or Trip: | this approved distance test days. exceed five (5) scapes | trict form, of the reason for the |  |
| Please give this form to the Vice Principal for Approval before getting your Teachers' signatures.  Vice Principal's decision:  Approved  Not Approved  Homeroom Teacher's Signature |  |  |  |                                   |  |
| Per.   | Subject  | Teacher's Signature  | Date   | Comment                           |  |
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| 4  |  |  |  |                                   |  |
| 5  |  |  |  |                                   |  |
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| 7  |  |  |  |                                   |  |
| 8  |  |  |  |                                   |  |
| CONDITION SCHOOL(E. Were the   | I FOR THE PRE-APPROVED A<br>XCEPT WHERE NOTED ABOV<br>re prior requests this yea   | ETE ALL ASSIGNMENTS AND TEST<br>ABSENCE. ALL HOMEWORK ASSIG<br>(E). TESTS ARE TO BE TAKEN AT T<br>PARTY  | NMENTS ARE DUE O   | N YOUR RETURN TO                  |  |
| Date(s) of   | f prior pre-planned abse   | nces   |  |                                   |  |
| Parent/G   | uardian signature  |  |  |                                   |  |
| Phone nu   | ımber  |  |  |                                   |  |
| Date:  |  |  |  |                                   |  |
| NOTE:  |  |  |  |                                   |  |

- 1. This form is to be used in place of the written excuse
- 2. This form is not complete until all signatures are attained(Parent/guardian, vice principal, and all teachers) and the form is turned into the attendance office once all signatures are attained.