

PRE APPROVED ABSENCES

At Donlon Elementary School we are committed to providing the greatest possible opportunities for students to succeed. One element in success is attendance. According to the education code in California, a student absence may only be marked excused for the following reasons: illness, medical appointments, court appearances, religious holidays, funerals, a pre-approved independent study contract, or other pre-approved justifiable reason (non-vacation). An absence for any other reason is noted as unexcused. The state requires schools to send the accompanying letter following three unexcused absences.

If you know ahead of time that your child will be missing school for something other than the reasons listed above, [i.e. a family wedding, sports tournament, other pre-approved justifiable reasons (non-vacation)], please complete the "Pre-Approved Absence Form" below and return as soon as possible to the Donlon attendance office. Completing this form in advance of the absence will allow an approved absence to be excused.



**Pleasanton Unified School District
REQUEST FOR PRE-APPROVAL OF ABSENCE**

For pre-planned absences of **one to four days**, to ensure that your absence or excuse is not counted towards truancy, advance written request by the parent/guardian and approval of the principal or designee is requested for the following justifiable personal reasons, including, but not limited to: (Ed. Code 48205 - a7)

- Appearance in court
- Attendance at a funeral service for a non-immediate family member
- Attendance at religious retreats
- Employment interview or conference
- Family necessity of less than 5 school days provided the pupil makes up all the work missed during the absence
- College visit (Post secondary options)
- Other pre-approved justifiable reason (non-vacation). _____

Student Name _____ ID# _____

Proposed dates for absence: From: _____ through _____ Total school days _____

Note: If the absence will be **5 or more days**, please fill out an Independent Study Contract available in the attendance office (PUSD Reg. 5105).

Agreement

Student: I understand that the absence from the classroom may have a negative impact on a student’s progress for that class, since it is impossible to “make-up” class discussions, lectures, audio-visual presentations, laboratory demonstrations, guest speakers, and other one-time events in the educational process. I understand that I may have additional work to complete upon my return to school. I will complete this work and turn it in to my teachers within the agreed upon time frame. I am aware that failure to do so may result in academic regression.

Parent: I agree to minimize the detrimental effect of the absence by having my child complete assignments given to him/her by his/her teacher. I am aware that failure to do so may result in academic regression. I realize my child may have additional work to complete upon his/her return to school.

Student Signature: _____ Parent Signature: _____

For Office Use Only

Absence: (circle one) Approved Not Approved

Principal or Vice-Principal Signature: _____ Date: _____