

LOGAN HIGH SCHOOL  
Pre-excused Absence Form

Student Name \_\_\_\_\_ Dates \_\_\_\_\_

Grade \_\_\_\_\_ School Related (Please Circle) YES NO

My son/daughter has requested permission to be absent from school for the purpose of: \_\_\_\_\_

It should be understood that the school may not allow such absences. This form should be signed by a parent/guardian, then taken to all of the teachers for comment and signature. The completed form must be returned to the Associate Principal's office before the date of absence (s) for approval.

It is understood that s/he will return to school promptly (unless under doctor's care for illness)

SUBJECT	CURRENT COURSE GRADE	TEACHER COMMENTS & SIGNATURE	TEACHER APPROVAL	
			YES	NO
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				

and that if s/he does not, s/he will be considered unexcused

Please indicate your approval of this proposed absence by signing this form in the proper place.

Parent Signature \_\_\_\_\_

Approved \_\_\_\_\_

Associate Principal \_\_\_\_\_

Not Approved \_\_\_\_\_

Grades 9-10 Dean of Students  
Grades 11-12 Associate Principal