

PLANNED ABSENCE REQUEST

NAME OF STUDENT _____

NAME OF PARENT(S) _____

DATE(S)/HOUR(S) OF PLANNED ABSENCE: _____

PURPOSE FOR PLANNED ABSENCE: _____

PLANNED ABSENCE AGREEMENT

A. We, parent and student, acknowledge the following regarding this planned absence:

1. Being a Unity student means being in attendance and prepared to learn whenever school is in session.
2. Being a Unity student is a full-time commitment and a student's primary responsibility.
3. A student's absence from class results in a natural loss of learning and usually results in lower scores on assessments. These lower scores may affect the final course grade, which becomes part of the student's permanent record and grade point average.

B. We, parent and student, agree to follow the procedures:

1. This Planned Absence Request must be filed with the Dean of Students at least two days before the absence occurs in order to be considered a planned (excused) absence of more than one (1) day.
2. The student is responsible for his/her learning and therefore responsible to contact his/her teachers before and after the planned absence.
 - The teacher will inform the student what needs to be learned.
 - The teacher will suggest learning activities, which may be given to the student before or after the absence.
 - The assignments, assessments, etc., must be completed as soon as is feasible; the maximum time allowed is two weeks from the day of return from the planned absence.
 - The student should not expect teachers to use class time for catch-up work. Unity's teachers are available before school, after school, and any other non-class time which can be arranged.

Date of request: _____

Signature of student: _____

Signature of parent/guardian: _____

Approval granted by Mr. Smith (or Mr. DeGroot)

Date