



**REQUEST FOR PRIOR APPROVAL OF ABSENCES**

In accordance with the policy of St. Joseph Catholic School governing absences, prior approval must be given by the administration to certain categories of absences if they are to be considered excused. In order to request approval of an absence falling into one of the categories below – prior to the absence – please complete this form.

<b>Name of Student</b>	<b>Grade</b>	<b>School</b>	<b>Teachers</b>

I request that prior approval be given for the absence of my child on the following dates:	Date(s) required to be absent
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*Check reason and give explanation for the absence.*

- Medical/Dental Appointment
- Religious Event Observations
- Educational Opportunity
- Other

Explanation of the reason checked:

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\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

<b>Disposition</b>	
Approved	
Disapproved	

\_\_\_\_\_  
Signature of Administrator

\_\_\_\_\_  
Date