

## SOLON PLANNED ABSENCE FORM

These forms are required of students who anticipate an absence of three (3) or more days. The planned absence form is to be obtained from the Principal's Office. Part I must be signed by the student's parents for any absence that is not excused under Ohio law and Board policy. Part II is for all anticipated absences, and must be signed by the student's parent and his/her respective teachers.

The following reasons for absence from school are approved by Ohio law and Board policy:

- A. Personal illness, or a medically necessary leave.
- B. Illness in the family necessitating the child's presence with physician confirmation.
- C. Quarantine of the home.
- D. Death in the family (permitted for three days maximum absent a showing of reasonable cause for a longer absence).
- E. Necessary work at home due to a parent/guardian's absence or incapacity (maximum of 10 days under most circumstances as approved by the Superintendent).
- F. Observation of bona fide religious holidays.
- G. Absence due to professional appointments.
- H. Service as a precinct officer in a primary, special or general election.
- I. College visitation.
- J. Out-of-state travel to participate in District-approved enrichment or extracurricular activities.
- K. Emergency or other circumstances determined by the Superintendent as constituting good and sufficient cause.

If the reasons for the absence must be approved by the Superintendent, the absence must be approved by the Superintendent in advance of submitting Part I of this form.

A student who is absent without excuse is considered truant. According to Ohio law and Solon Schools policy, after seven unexcused absences in one month or 12 in one school year, the district will be required to file truancy charges with the Cuyahoga County Juvenile Court.

### PROCEDURES

1. Student and/or parent contacts the Principal's Office in advance of planned absence to request approval of the planned absence, and to obtain a Planned Absence Form. Student and/or parent complete Part I of the planned absence form and submit it to the Principal's Office at least two weeks before the planned absence. The deadline may be waived in the case of a documented emergency. Once a planned absence is approved, the student and/or parent must complete Part II of this form.
2. Student presents the form to each classroom teacher at least two days in advance of the last day in attendance. Teachers check appropriate responses, add comments and sign the form.
3. Student shares any teacher concerns with the parent/guardian.
4. Parent and student sign the request/agreement statement.
5. Student presents completed form to the Principal's Office at least one day before departure date.

**FAILURE TO COMPLETE THESE NECESSARY STEPS WILL RESULT  
IN THE ABSENCES BEING RECORDED AS UNEXCUSED.**

**PART I**

**REQUEST FOR EXCUSED ABSENCE FOR GOOD AND SUFFICIENT CAUSE**

Student's Name: \_\_\_\_\_

Student's Grade: \_\_\_\_\_

Dates of Planned Absence: \_\_\_\_\_

Purpose of Planned Absence (attach additional pages or descriptions if more space needed):

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How has the student performed academically:

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How will the planned absence affect the student's academic performance:

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\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian(s) Signature:

\_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Principal's Signature: \_\_\_\_\_

Superintendent's Approval: \_\_\_\_\_

**PART II**

**FOR APPROVED PLANNED ABSENCES**

TO THE TEACHING STAFF: \_\_\_\_\_ Grade \_\_\_\_\_ has requested to be absent from school on the following dates: \_\_\_\_\_, which involves \_\_\_\_\_ school days. You are asked to provide the information assignments requested.

**PARENT AND STUDENT REQUEST/AGREEMENT**

We have read the policy statement. We understand that:

1. Teachers are not responsible for allotting time for tutoring students upon their return.
2. All assignments must be submitted upon the first day back unless other arrangements have been made by the individual teacher.

\_\_\_\_\_  
Student Signature

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number

**THIS REQUEST FOR A PLANNED ABSENCE HAS BEEN APPROVED**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Principal

Academic Subject: \_\_\_\_\_ Period \_\_\_\_\_

- \_\_\_\_\_ A. Make up work will be/has been arranged.
- \_\_\_\_\_ B. Date \_\_\_\_\_ that has been arranged for student to make up tests/quizzes.
- \_\_\_\_\_ C. May result in a significant grade change.
- \_\_\_\_\_ D. May result in failure for nine (9) weeks of course.

Additional Comments:

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