Smyrna High School Administrative Excuse Request

Name: Date of Absence(s):	
Reason for request:	
is necessary and in the best interest of the student and parent	e absence(s) and will be considered on the basis of whether it t. Heavy emphasis for approval will be based on previous e performance and classroom teachers' recommendations. An in time limits set by each teacher. All days missed count
Parent Signature	Date
The student must obtain the signature of each teacher, have Attendance Secretary in the front office prior to the absence	
Teacher's	Signature(s):
Period 1:	Period 2:
Period 3:	Period 4:
Period 5:	Period 6:
Period 7:	Period 8:
To be complet	ed by office staff
Total days absent this year:	Total behavior incidents this year:
Approved	Denied
Signature of School Official	