VACATION FORM

TO: Teachers of _____ Grade _____
(student's name)

RE: Vacation to: _____

We, the parents/guardian of _____

request homework for our son/daughter for the dates of _____

through _____. All work assigned during this period will be completed upon return to school or by special arrangement with each individual teacher. We understand that vacation days do count towards hours of absence, and any subsequent absences over 72 hours will be coded as unexcused without a doctor's excuse.

****Administrative signature must be taken care of prior to submission to the teachers to verify the student does not have a problem with attendance****

Signature of Administrator

TEACHER	SUBJECT	ASSIGNMENT GIVEN

Parent's Signature _____ Date _____

2/12/21