



N.P.H.S. Absence Request



Student's Name (Please Print) _____ Grade: _____
(LAST) (FIRST) (MI)

Early Dismissal:

Will be leaving on _____ (date) at _____ (time) for:

- Medical Appt. Funeral Religious Holiday
- Other- explain: _____

Estimated time of return: _____

Absence:

Was absent on _____ (date/s) for the following reason:

- Medical Appt. Funeral Religious Holiday Illness
- Other- explain: _____

Tardy:

Was late on _____ (date) due to:

- Medical Appt Funeral Religious Holiday Illness
- Other- explain: _____

Parent/Guardian Signature: _____ Phone # _____

* Proof of appointments will be required after 9 absences. An absence form MUST be submitted within 3 days of returning from an absence. Illegible or inaccurate forms will NOT be processed.

Office use only:

Received on: _____ Total Excused absences: _____ Total Unexcused absences: _____

- Excused Unexcused Submitted beyond 3 day limit Illegible Rq Dr.'s notes
- Verify authenticity with parent Proof of appt provided Early Dismissal verified with by: _____



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