

**Air Academy High School**  
**PRE-ARRANGED ABSENCE FORM**  
 (Use for Absences of Three or More Consecutive Days)

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Date of Student's Absence: From \_\_\_\_ / \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Total number of school days student will miss: \_\_\_\_\_

Reason for Absence: \_\_\_\_\_

Return Completed Form to Student Services by (at least 3 school days before absence): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*Students are required to take this form to their teachers for completion of each of the following blocks.*

Block	Class	Current Grade	Is Absence Recommended?	Teacher Signature	Comments, Assignments, Due Dates
B1			<input type="checkbox"/> Yes <input type="checkbox"/> No		
B2			<input type="checkbox"/> Yes <input type="checkbox"/> No		
B3			<input type="checkbox"/> Yes <input type="checkbox"/> No		
B4			<input type="checkbox"/> Yes <input type="checkbox"/> No		
S1			<input type="checkbox"/> Yes <input type="checkbox"/> No		
S2			<input type="checkbox"/> Yes <input type="checkbox"/> No		
S3			<input type="checkbox"/> Yes <input type="checkbox"/> No		
S4			<input type="checkbox"/> Yes <input type="checkbox"/> No		

**Note: Teachers will determine the final deadline for any missed work, and will also determine whether to accept the assignment for credit.**

**Only a AAHS Administrator has the authority to determine whether this absence will be excused or not.**

As the parent/guardian of \_\_\_\_\_, I am aware of the possible impact that may be created by this absence.

\_\_\_\_\_  
 Parent/Guardian Signature                      Date                      Administrator Signature                      Date