



QCCS Pre-Arranged Absence Forms

Every student reaching the peak of success is the primary goal at Quad Cities Christian School. Although learning occurs in a variety of settings, time spent directly with the teacher and collaboratively with peers is essential to student

Pre-Arranged Absence Procedure

1. Parent and student should refer to the Student Handbook for policy.
2. Pre-arranged absence form is completed by parent/guardian and submitted to the school at least **3 school days prior to scheduled absence.**
3. Principal will review completed form and notify parent/guardian of approval or non-approval.
4. Student and parent are responsible for communicating arrangements with teachers for missed work.

Student's Name: _____ Grade: _____

Date(s) of Absence: _____

The reason for my student's absence(s):

____ Family Trip accompanied by at least one parent/guardian

____ Religious retreat, church sponsored trip, seminar, or convention

____ Court appearance supported by documentation from the court system

____ Medical supported by documentation from a doctor's office, hospital, clinic, etc.

____ Other: (please explain) _____

I understand that absences will be coded in accordance with the QCCS Administrative Policy set forth in the student handbook.

Parent Signature: _____ Date: _____

Teachers may give assignments prior to or after this absence. Students must complete all makeup work assigned by teachers.

To Be Completed by Parent/Guardian

To Be Completed by Teachers/Student

		Student Initials	Teacher Initials
Period 1	I have checked with my teachers and notified them of my absence.		
Period 2	I have checked with my teachers and notified them of my absence.		
Period 3	I have checked with my teachers and notified them of my absence.		
Period 4	I have checked with my teachers and notified them of my absence.		
Lunch	N/A		
Period 6	I have checked with my teachers and notified them of my absence.		
Period 7	I have checked with my teachers and notified them of my absence.		

____ This Absence will **NOT** adversely affect this student's education/grade

____ This Absence **WILL** adversely affect the student's education/grade

To Be Completed by QCCS Staff

Current # of Absences: Excused _____ Unexcused _____ Tardies _____

Final Approval: Yes _____ No _____

Administrator Signature: _____ Date: _____

Comments: _____
