



Honolulu Waldorf High School
ADVANCE NOTICE OF ABSENCE

Student's Full Name: _____ Date(s) of Absence: _____

Reason for Absence: _____ Date Submitted: _____

INSTRUCTIONS:

1. Complete the top of this form and submit it at least two weeks prior to the start of your absence to your class sponsor. The sponsor will then bring the form to the next high school faculty meeting for approval.
2. If the high school faculty approves the extended absence, the student must then obtain signatures from his/her individual teachers and have them make comments on the form.
3. The form must then be signed by the student's parents and returned to the front office.

Class Sponsor's Signature: _____

CLASS PERIOD	DAYS OF ABSENCE				
	Day: _____	Day: _____	Day: _____	Day: _____	Day: _____
	Date: _____	Date: _____	Date: _____	Date: _____	Date: _____
PE					
Main Lesson					
Period 1					
Period 2					
Period 3					
Period 4					
Period 5					

HWS High School Faculty has reservations concerning this student's planned absence. Missed classes may have a negative impact on his/her academic performance.

Teacher's Comments/Concerns: _____

"I understand that this absence from school may result in academic consequences, including lowered grades for my child."

SIGNATURE (Parent/Guardian)

PRINT NAME (Parent/Guardian)

Date