

**FORESEEN EXTENDED ABSENCE FORM**

**Student:** \_\_\_\_\_ **Home Form:** \_\_\_\_\_

The parents of this student have formally communicated that s/he will be absent from classes at Winston Churchill C.I. for the following period:

\_\_\_\_\_ to \_\_\_\_\_  
Date Date

Therefore, he/she will be missing \_\_\_\_\_ instructional days.

**Purpose of absence:** \_\_\_\_\_

**Parent contact information during student's absence:**  
Phone Number: \_\_\_\_\_  
e-mail: \_\_\_\_\_

We acknowledge the right of the parent/guardian to temporarily withdraw the student from classes<sup>1</sup>. The school understands that some absences are unavoidable. However, it is important that parents and students understand that teachers will not be able to provide work for the student which will duplicate the classroom experience. It is unlikely that the student will be able to make up missed tests, examinations, or performance-based evaluations upon his/her return to school. Therefore, evaluations missed during this absence **will receive a mark of zero (0)**. An absence of any significant length will have a negative effect on the student's mark, and may result in the loss of the student's credit.

The student must approach each of his/her teachers immediately to find out what work will be covered during the absence. Teachers will make every reasonable effort to accept assignments before the student's departure, and if possible, will provide work for the student to complete during the absence. It is the student's responsibility to submit evidence of learning.

Please Turn Over and Complete Page 2

<sup>1</sup> Ontario Education Act Regulation 298, Paragraph 23 (3): A pupil may be excused by the principal from attendance at school temporarily at any time at the written request of a parent of the pupil or the pupil where the pupil is an adult.

**FORESEEN EXTENDED ABSENCE FORM (PAGE 2)**

**Student:** \_\_\_\_\_ **Home Form:** \_\_\_\_\_

**Step 1:** Please have the following completed by all your teachers.

Teachers will state **how** this absence will impact academic progress.

	Teacher Name & Course	Teacher Signature	Program of Study (attach page if required)
Period 1			
Period 2			
Period 3			
Period 4			

**Step 2:** After step 1 is completed, please sign and date below to acknowledge the acceptance of academic responsibilities.

\_\_\_\_\_  
 Student Signature                  Parent/Guardian Name                  Parent/Guardian Signature                  Date

If a student will be absent longer than the time specified on this sheet, it is the responsibility of the parent to contact the school in a timely manner.

**Step 3.** Please return this completed form to your assigned Vice-Principal

Vice-Principal Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Distribution:  OSR     Parent     Attendance Secretary     Teacher(s)