MVCA Pre-Approved Extended Absence Form

Student Name _____ **Dates of absence** _____

Purpose of Absence _____

Approval/Denied (Reason) academic standing will be a factor _____

Directors signature _____ **Date** _____

The Student is responsible for obtaining teacher signatures and returning completed form to the office. Final approval will be determined by administrator.

Class Title	Teacher	Grade to Date	Assignment(s) to be made-up/or completed	Due Date