

Paris Community Unit School District No. 4

Danette Young, Superintendent
Dan Lynch, Principal
www.crestwood.k12.il.us



15601 US Hwy 150
Paris, IL 61944
Phone: (217)465-5391
Fax: (217)466-1225

ELEMENTARY ANTICIPATED ABSENCE FORM

NAME _____ DATE _____

Will be absent for the following day(s): _____

REASON FOR ABSENCE: _____

TYPE OF ABSENCE: Vacation _____ Personal _____ Medical _____

All parents and student should be familiar with the Crestwood attendance policy in the Student Handbook and Calendar. This Anticipated Absence form will not in any way change the Handbook policies. This form **MUST** be signed by an administrator at Crestwood CUSD #4.

Teachers will provide assignments, if possible, for the time the student will be absent. If the teacher is unable to provide the assignments because of the nature of the instruction; i.e. class discussion, projects, tests, etc..., the student may be required to complete the make-up work in advance of the absence.

PROCEDURES: Your child's teacher will sign this form which will indicate to the office that they are aware that your child will not be in class for the day(s) anticipated above and that they have informed the student of the consequences of the absence, and of any assignments to be completed either prior to, during, or upon the return from their absence.

TEACHER SIGNATURE: _____

This form is to be completed and returned prior to the day of the anticipated absence.

I, the undersigned parent/guardian, have read the Student Handbook and understand the potential consequences of missing the day(s) requested.

Parent Signature

Administrator Signature