Juniata Mennonite School
289 Leonard Hill Road
McAlisterville PA 17049
717-463-2898

Educational Trip / Advance Absence Request Form

Part A (to be filled out by parent and/or student)
Student's Name:_____Grade:_____
Dates of Trip: From_____To_____
Destination of Trip:_____

Describe the nature of the trip; what is the educational value? (Or use this space to explain unusual circumstances requiring a trip taken during school)_____

_____

_____

_____

Part B (to be filled out by student AND initialed by teacher; or parent AND teacher for grades K-2)
The student is required to inform each of his or her teachers of the absence and gather the necessary assignments to cover the period of absence.

Teacher	Initials	Teacher	Initials
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Part C (to be signed by parent AFTER Part B is completed)

_____ _____
Parent's Signature Date

This form is to be submitted two weeks prior to trip.

Part D (to be completed by school)
( ) Excused
( ) Not Excused

Notice to: ( ) Parents
( ) Office

Principal's Signature: _____
Date: _____

Unexcused/Illegal Absences_____
Excused/Legal Absences _____
Total Absences _____