Instructions for completing form

1. **Use one form for students in each building:** elementary, middle school and high school.
2. **Form must be submitted to the principal’s office three school days prior to the absence** for which the excusal is requested.

   Date __________________

   It is requested that the following students be excused from school attendance so that they may participate in a trip of educational value:

<table>
<thead>
<tr>
<th>Name</th>
<th>Grade</th>
<th>Room</th>
<th>Building</th>
</tr>
</thead>
</table>

   Please list the siblings, and their grade level, for whom you are also requesting excusal for this educational trip: ______________________

   1. Dates for which excusal is requested: __________________________________________

   Please check: Full Day ______

   AM _______ -- time arriving: _______   PM _______ -- time leaving: _______

   2. Describe the trip to be taken: ____________________________________________

   3. In what way do you consider the trip to be of educational value to the student(s)?

   4. If other than parent or guardian, what adults will accompany the student(s) on this trip?

   **It is understood that:**

   5. **Grades 6-12 only:** The student is responsible to contact appropriate teachers concerning this absence in order to be aware of all assignments that must be completed.

   6. All students: Upon returning to school, the student will, on his/her own time, be responsible for making up the work missed.

   7. All make-up work is to be accomplished to the satisfaction of the teacher concerned.

   8. If, for any reason the trip is canceled or shortened, the student(s) must report to school the first day you return home.

   *NO TRIPS WILL BE EXCUSED DURING PSSA/KEYSTONE EXAMS TESTING OR FINAL EXAMS AND MAY NOT EXCEED 10 DAYS TOTAL. IF ALL SCHEDULED TESTS ARE COMPLETED, REQUESTS FOR EDUCATIONAL TRIPS WILL BE CONSIDERED FOR APPROVAL.*

   **High School Keystone Exams (Algebra I, Biology, Literature):** Dec. 5-6 & Dec. 9-10 / Jan. 7-8 / May 12-15 & May 18-19

   **Middle School Keystone Exams (Algebra students only):** May 11-12

   **High School Final Exams:** January 14-17 / June 1-4

   (office only)

   Date received in office: ______________________

   Approved _______  Not approved _______

   Reason not approved: __________________________________________

   Date: ______________________

   Principal: ______________________

   ______________________

   Parent or Guardian Signature

   ______________________

   Street Address

   ______________________

   City, State, Zip Code

   ______________________

   Telephone Number