

United Elementary School
Educational Trip Excusal Form

Student's Full Name _____ Grade _____ H.R.# _____

Date(s) or proposed absence(s) _____ To _____

Person(s) directing and/or supervising student during the above absence.

Name _____

Address _____ Telephone # _____

Itinerary of trip. Include activities which could be educational in nature and will, therefore, provide the child with some valuable experiences outside the classroom.

List names and grades of other school age children within your family who will be participating in this experience:

I understand that this application is subject to approval by school district officials. **ANY CLASSWORK MISSED DURING THIS PERIOD OF ABSENCE MUST BE MADE UP WITHIN A REASONABLE PERIOD OF TIME.**

Signature or Parent/Guardian

FOR SCHOOL USE ONLY:

Prior Requests: _____ Dates _____

Determination: Approved _____

School Official _____ Date _____