



## Excused Absence Request Form

Date: \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Date(s) Absent: \_\_\_\_\_

Reason for absence:

Doctors appointment (attach note)

Death in the family

Sick/non-doctor visit

Other (must provide details)

Students are allowed 5 unexcused absences per 9 weeks and a total of 20 absences for the year. Please be aware that students who accumulate absences tend to struggle in their classes. Please make sure your student is here whenever possible.

If you have any details you need us to be aware of please write them here:

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Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date Turned In: \_\_\_\_\_



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