## Math and Science Academy

## 503 Form - Request to Waive Unexcused Status of Student Absence Information

This form must be submitted to the administrative office <u>at least 5 school days prior to</u> the planned absence. **Please plan accordingly!** 

The MSA Board of Directors (BOD) believes that it is the student's right and responsibility to be in school. Further, the BOD believes that regular school attendance is directly related to success in academic work, benefits students socially, provides opportunities for important communications between teachers and students and establishes regular habits of dependability important to the future of the student. There is an MS A policy that articulates this belief (See MSA Policy 503 Student Attendance). This policy encourages regular school attendance and recognizes that class attendance is a joint responsibility to be shared by the student, parent or guardian, teacher, and school administrators.

Excused absences fall under these categories and YOU DO NOT HAVE TO COMPLETE THIS FORM FOR THE FOLLOWING:

- Family emergencies (serious family illness, injury or death)
- Medical appointments (the school reserves the right to verify)
- Student illness
- School sponsored activities
- Required court appointments
- · Absences pre-approved by the administration

(See MSA Policy 503 Student Attendance for more information)

The school has the responsibility, under state law, to determine whether an absence is excused, and, if not, to take corrective action, including disciplinary action. The information provided on this form will be used by the MSA Director to determine whether a family vacation, or other unexcused absence will be excused.

Please fill out the following information completely, sign it, and give it to administrative personnel for processing.

Be aware that if a student misses 20 days in a school year due to excused or unexcused absences, the student's grade might be reported as a modified grade on their transcript.



## 503 Form - Request to Waive Unexcused Status of Student Absence

Name of Student: \_\_\_\_\_

Date of Request: \_\_\_\_\_ Date(s) of Planned Absence:\_\_\_\_\_

Number of School Days to be missed: \_\_\_\_\_

Describe the Planned Absence, including all information you feel is pertinent and in enough detail so the Director can determine if the absence merits a waiver.

Why were you unable to arrange for this absence to occur on non-school day?

Parent Signature:					
Parent email addres	S:				
their grade might be re	ported as a m	odified grade	on their transcrip		at
Parent Name (Print)				<u></u>	
Daytime Phone # (_		.)			
Date Submitted:		/	/	_	
	Month	Dav	Year		

## **Teacher Communication:**

Student will meet with and create a plan to make up work with each teacher prior to submitting form for approval. (Have each teacher initial after meeting with them.)

Period 3 Teacher       Period 4 Teacher         Period 5 Teacher       Period 6 Teacher         Period 7 Teacher       Period 6 Teacher	
Period 7 Teacher	
FOR OFFICE USE ONLY:	
MSA Director Action Taken:	
These absences have been determined to be <b>EXCUSED</b>	
These absences have been determined to be <b>UNEXCUSED</b>	
EXPLANATION OF DENIAL	
Request for waiver of the dates of absence outlined has been denied for the following reason(s):	
<ul> <li>( ) The request was not submitted in advance of the planned absence as prescribed.</li> <li>( ) The student has unexcused absences on previous dates.</li> </ul>	
() The absence dates conflict with critical testing or academic activities.	
<ul> <li>( ) The student already has numerous absences.</li> <li>( ) This absence will place the student in academic peril.</li> </ul>	
<ul> <li>( ) The activities involved with this absence can be scheduled during a non-school day(s).</li> <li>( ) Other</li> </ul>	
The decision to deny your request for this waiver was the result of careful consideration of numerous factors that are known to impact academic success. I would be more than happy to provide you with additional insight as to how this decision was reached. Please feel free to contact me.	
(MSA Director) (Date)	