

TRI-COUNTY NORTH MIDDLE SCHOOL
530 PANTHER WAY
LEWISBURG, OH 45338
937-962-2631

Joe Hoelzle Principal Kathy Gevedon Counselor Karen Steck, Secretary /Attendance

PRE-ARRANGED ABSENCE PERMISSION FORM

This is to certify that _____

will be absent from school during _____ to _____
Month Day Day Year

for the following reason(s):

PARENT(S)

SIGNATURE: _____

This form must be completed by each teacher and approved by the building principal before this request is granted. **Every attempt should be made to turn this form in five (5) days prior to the absence. When this is not possible, please turn in as soon as possible. All vacation days will be counted toward the ten day absences.**

PERIOD

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

Principal: _____

Superintendent: _____