

9935 JOHNNYCAKE RIDGE ROAD

CONCORD TWP., OHIO 44060
PHONE: 440-352-6169 + FAX: 440-639-0143

WWW.ST-GABRIELSCHOOL.ORG

BEING CHRIST . EVERY DAY . EVERYWHERE

STUDENT PERSONAL CONVENIENCE ABSENCE APPLICATION

Parents have received the school calendar which indicates school holidays and vacation periods. Absence from school for student and/or parent personal convenience is not provided for under the attendance laws of the State of Ohio. Therefore, the proposed absence will be considered "UNEXCUSED' and parents are asked to complete this form to relieve the school of responsibility. The completed form is to be returned to the principal by the parent/guardian at least one week prior to the personal convenience absence.

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Student's Name Address First School Day Absent	Phone_	
State clearly the nature of this absence and the reason why the leave must be taken during the school year.		
STATEM We understand that absence from under the school attendance laws o but that by completing this form and make up tests missed and will not be made by the students by the convenience absence or an "F" will be present for semester examination Programs in April.	f the State of Ohio and this all fulfilling the requirements, the e considered truant. Arrange he second day he returns to be recorded for each test.	student will be "UNEXCUSED" student will be permitted to ement to make up tests must to school after a personal All students are expected to
Teachers may, but are not required, to prepare assignments for students who are anticipating a personal convenience absence. We further understand that when a student returns from a personal convenience absence teachers are required to grade, examine, or correct any work they have assigned to the student during the absence if the work is returned on the first day the student is back in school. The school can assume no responsibility for a drop in grades suffered by a student who is absent due to personal convenience.		
All of the above regulations concerning personal convenience absences are applicable to trips which students accompany their parents/ family.		
Date	Student's Signature	
Parent's Signature		
Total Days Absent	_Principal's Signature	
	Date	