

Kings Local School District Pre-Approved Occurrence Request

Student:	Grade:	Teacher:
Directions: The parent is to complete	e the top sectior	n of the request and submit it to the Attendance Secretary.
Please submit seven (7) days in adva	nce of the first o	day of the occurrence.
Please be advised that pre-approved	l occurrence cou	unts are counted within the district's yearly (12) occurrence
allotment. Student's are only allotte	d (12) occurren	ces per school year. All of the following types of absences will
be counted as (1) occurrence: tardies	s, early releases	, full days and/or partial days. Any day after the (12) allotted
		used. Medically excused occurrences do not go towards a
		lease refer to the district's " Attendance Code of Conduct" for
further information.	,	
Parent's Section:		
Occurrence to begin on (date):		
Student will return on (date):		
Number of occurrences to be use	ıd:	
Number of occurrences to be use	·u	
Homework requested for occurre	ence (if possible	e) Yes No
I understand that my child is resp	onsible for cor	mpleting the school work when he/she returns to school.
Parent Signature		Date
Secretary's Section:		
# of Occurrences at time of reque	est:	Date Calculated:
Please attach the student's full at	tendance for p	orincipal review.
Principal's Section:		
Approved (excused) (Depe	endent on atte	endance on the start date of the occurrence)
Not Principal approved (unexcuse	ed)	
If approved, it is the responsibility	y of the parent	t/student to request make-up work with each teacher.
Principal's Signature		Date: