

Upper School Attendance Waiver Request Form

I/we, _____ parent(s)/host parent(s)/guardian(s) wish to
(please print) (please circle)

apply for an appeal of waiver of the attendance policy for _____
(please print student's name)

due to extenuating circumstances for the following dates and corresponding reasons:

Date(s)	Reason for request

Additional explanation (as needed): _____

Parent Name: _____ Date: _____

Parent Signature: _____

For Office Use:

Total number of absences at time of request	Class	Number of Proposed Absences	Total

approved denied
(Based on faculty committee recommendation)

_____ Head of Upper School

_____ Date