

Caledonia Secondary School
EXTENDED ABSENCE
Notification and Acknowledgement of Responsibility

This form should be completed and submitted to the Counsellor no less than two weeks prior to the start of the absence.

Student _____

Dates of Absence _____

Reason for Absence _____

Block	Course	Teacher	Options for Coursework	Teacher Signature
Before regular school day				
1				
2				
3				
4				
After regular school day				

I recognize that

- I am responsible for all learning and assignments missed during my absence.
- I will have to spend time outside of class to make up for learning and assignments missed during my absence.
- There may be some activities or assessment of learning that I am not able to make up, which may have a negative impact on my academic standing in my courses.

Signatures: Student _____ Parent _____

Counsellor _____ Administrator _____ Office: Attendance _____ File _____