



THE SCHOOL DISTRICT OF HAVERFORD TOWNSHIP

50 East Eagle Road
Havertown, PA 19083

Valerie L. Burnett, Ed.D.
Director of Pupil Services and Special Education
(610) 853-5900 ext. 7236

REQUEST FOR PREARRANGED ABSENCE

NAME _____ **HOMEROOM** _____

DATE(S) OF ABSENCE _____

REASON:

Family travel for educational reasons will be marked as excused absences if the request is preapproved by the building principal. Students are required to complete all work missed during their absence.

It is recommended that you contact their teacher(s) 10 days prior to leaving and obtain any assignments that can be completed during the absence in order to lessen the impact the absence might have academically.

REQUIRED SIGNATURES

PARENT/GUARDIAN

PRINCIPAL
