Bishop Pinkham School
Extended Leave of Absence Form

Student Name:_____Homeroom:_____

Date of Absence: from_____ through _____ inclusive.

Reason for Absence (please check one):

A. (_) Family Vacation

The **student** will:

1. consult with each teacher a minimum of **one week** before leaving.
2. **check D2L** (schedule tool) while away and before returning to school to ensure that all missed work is completed, and be prepared to write any missed tests.
3. **take responsibility** for missed work and be prepared to accept some reduction in mark to reflect the importance of missed work if make-up tests cannot be written upon return and/or if assignments are not completed.

B. (_) Medical or Compassionate Leave

Every effort will be made by the staff of École Bishop Pinkham School to allow the student to catch up on work missed, and as far as possible, complete the course with minimum penalty for missed work. We encourage students to **check D2L** (schedule tool) regularly to assist them in staying up to date.

Please Note:

Regular attendance is essential for student learning and is governed by the *School Act of the Province of Alberta*. Students are required to attend every day the school is in operation, unless prohibited from doing so because of illness, a family emergency, or the observance of a religious holiday. If a student must be absent from school, we ask that the parent/guardian telephone the school at 777- 7840 (ext. 2900) to report the absence. The parent/guardian will receive a call from the school if his/her student has an unexcused absence.

If a student will be absent for more than three school days, an *Extended Leave of Absence Form* must be completed. Several days prior to departure, the student is asked to take the form to all teachers for signatures and then bring it to the office for approval and copying.

It is the ***student's*** responsibility to complete any missed schoolwork and to be prepared to write any missed tests upon his/her return.

Parents, please sign below to acknowledge that you have read and understand the guidelines on the previous page:

Parent/Guardian signature:_____

Students, please read and sign the declaration below:

> I have read and understood the previous page, and I have consulted with all my teachers prior to my departure. I will check D2L for missed work and tests before returning to school and I accept my teachers' decisions regarding if, when, and how I will make up missed work.

Student signature:_____

Teachers, please initial below to acknowledge the absence of this student:

Subject	Initial
English Language Arts	
French Language Arts	
Mathematics	
Physical Education	
Science	
Social Studies	
Health	
Option:_____	
Option:_____	
Option:_____	

_____

Signature of Administrator Date