

*Innovations International Charter School of Nevada*

Notification of Extended Student Absence

Although we encourage our students to strive for perfect attendance throughout the school year, we understand that occasionally circumstances require families to plan for extended absences (3 or more days in a row). In such events, it is in each student's best interest for the parents/guardians to notify the school and the teachers. Please use this form for each occasion. **Please be sure to submit the form to your child's homeroom teacher at least one (1) school day prior to the absence so your child's teacher may have time to gather all necessary work to be completed.**

Student's Full Name: \_\_\_\_\_

Grade Level: \_\_\_\_\_ Homeroom Teacher: \_\_\_\_\_

First Day of Extended Absence: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Last Day of Extended Absence \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Date of Return to Class \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Reason for Extended Absence: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Primary Parent/Guardian Contact Name: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_

Secondary Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Message From Parent/Guardian (as needed):

\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Registrar's Signature)

\_\_\_\_\_  
(Date)