



FS-23-TW TEMPORARY STUDENT WITHDRAWAL FOR 6 – 15 DAYS PARENT/LEGAL GUARDIAN REQUEST

When a student will be away for 6 – 15 consecutive days.

A new form must be completed each school year AFTER a student has attended in person.

School: _____ Grade: _____ Home Room: _____

Student Name: _____ OEN # _____

Last Date in Attendance (DD/MM/YY): _____

Student Return Date: _____

Total Number of School Days Missed: _____

Family Contact Information (during period of absence): _____

Reason for Absence: _____

I, the parent/legal guardian of the above student, request that my child be excused from school for the above period as per Regulation 298 of the Education Act, Section 23 (3). I understand regular school attendance is important for student success and take full responsibility for the student’s absence from school and any missed work/tests during the period of absence.

I understand the school is not required to provide alternative programming. If the student does not return by the 15th day of consecutive absences, I understand **they will be removed from the enrolment register effective their first day of non-attendance.**

Parent/Legal Guardian Signature: _____ Date: _____

Principal or Delegate’s Signature: _____ Date: _____

If a student is absent for 5 days or less, mark as “A – vacation” or “A – parent approved” as per information provided by the parent/legal guardian.

Office attendance instructions for students away for 6 – 15 days who have completed this form:

Mark as “G – temporary withdrawal” until the return date. If the student does not return after 15 consecutive absences, demit to the first day of non-attendance.

Original: Principal (retain for current year +2)

Copy: Social Worker (for compulsory school aged students absent 15 consecutive days or more who have not returned on the “Student Return Date” or for retirement notification purposes only)



PROGRAM OF STUDY

A temporary measure to provide work missed while the pupil is away. The student is expected to return to school to complete the course/grade.

Student Name: _____

Last Date of Attendance: _____ Student Return Date: _____

Teacher: _____ Subject/Course Code: _____

Assignment:

Teacher: _____ Subject/Course Code: _____

Assignment:

Teacher: _____ Subject/Course Code: _____

Assignment:

Teacher: _____ Subject/Course Code: _____

Assignment:
