



Student Leave of Absence

As outlined in the DPCS Family Handbook, if your student(s) has a planned absence and will be gone from DPCS for more than 10 student contact days, please complete the following form. This allows our front office and teachers to be more effective in supporting your child's education during their absence. Please submit this form no less than 10 days prior to your departure in order to ensure ample time in preparing student materials.

Student Name(s): _____

Grade Level and Teacher: _____

Dates to be Missed: _____

Reason for Absences: _____

Please sign below to acknowledge your student will be missing 10 or more consecutive student contact days. By doing so, you are also acknowledging that upon return, the Excessive Absence Form will be required to be submitted to the APC for approval.

Parent Signature: _____

Date: _____

Head Teacher Signature: _____

Date: _____