

## Travel Release Form

We are requiring you to complete this form because your request for release from school is for one of the following reasons that requires the Superintendent's approval:

1. It is for a period that exceeds five school days.
2. Your child has already been approved previously this semester for release for a period of five school days.
3. Your request is during our semester exam or state mandated testing window.

Please note:

- Approval of your request is not guaranteed.
- Students are responsible for all missed work.
- A form must be completed for each student and at each school.
- This form **MUST** be submitted to the school office at least three (3) days in advance of the absences.
- This form is to be used for full day or partial day absences.

STUDENT NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_

SCHOOL ATTENDING: \_\_\_\_\_

NUMBER OF DAYS REQUESTED: \_\_\_\_\_

DATES OF ABSENCE: \_\_\_\_\_

REASON FOR REQUESTING RELEASE FROM SCHOOL: (You may attach explanation if necessary.)

\_\_\_\_\_

\_\_\_\_\_

PARENT SIGNATURE: \_\_\_\_\_

\_\_\_\_\_ Approved \_\_\_\_\_ Not Approved

PRINCIPAL'S SIGNATURE: \_\_\_\_\_

SUPERINTENDENT'S SIGNATURE: \_\_\_\_\_