

HIGH SCHOOL ATTENDANCE SCREENING FORM

***Send any documentation to the Attendance Manager, Mrs. Cox. Documents already on file will be reviewed when form is turned in.**

The Attendance Screening Form for the first semester is due the 1st Friday in December.

The Attendance Screening Form for the second semester is due the 2nd Friday in May.

Student Name: _____ Today's Date: _____

Parent Name (print): _____ Parent Signature: _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-Mail: _____ Home Phone #: _____

Work Phone #: _____ Cell Phone #: _____

Grade Level: _____

Period	Teacher	Number of Absences	Committee Notes
1st			
2nd			
3rd			
4th			
5th			
6th			

Parents/Students: Please return form to a member of the Attendance Committee.

Committee Notes:

Date Received: _____ Date of Meeting _____

Approval Granted: _____ Yes _____ No

Committee Signatures: _____

Comments: _____