GJSHS APPLICATION FOR ATTENDANCE RECOVERY

Name:		Grade	Today's Date				
Date(s) st	tudent will be absent from school:	# of day(s)a	absent				
Reason fo	or absence(s):						
1.	Potential uses for the application include: tardies, absences and dismissals. Please refer to the student handbook page 14.						
2.	Bring this form to individual teachers to inform them of your absence(s) and to obtain any assignments that can be given ahead of time. Once complete, return to the Main Office for signature. Once signed by administration, the student will receive the original and a copy will be made for the Main Office for the student's file.						
3.	After work has been completed, students are <u>required</u> to bring this form to their teachers for verification of work completed, obtain teacher sign off and then return to the Assistant Principal for review. Administration will determine whether or not the student will be granted credit towards this absence. For example, a student may earn attendance credit if all required work is completed within the time frame indicated below. The student record will indicate "AL" for alternative learning. Students that complete the assignments listed on the backside of this form must receive verification from their teachers and will then earn back credit for their missed day(s).						
4.	As stated above, this is an application for attendance recovery; approval will be determined by school administration. A copy of this application will be kept on file.						
Note:	Regular attendance enhances learning by exposing students to a greater amount of academic content, instruction, and time to apply new concepts and skills. It allows for teacher explanation and the interaction between students and between teacher and student. Therefore, students in grades 9 -12 who accumulate more than 14 unexcused absences in a year-long course or 7 unexcused absences in a semester course will not receive credit toward absences for the semester/year long course and could result in loss of credit.						
Parent s	ignature (required):						
*****	*****************	*****	***********				
For offic	e use only:						
Assistan	t Principal:	Date:					
consider	ion needs to be resubmitted to the Main Offic ration:		eed upon date listed below for				

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	ASSIGNMENTS								
BLOCK	COURSE	Include due date if possible	TEACHER SIGNATUR E	WORK VERIFICATION SIGN OFF/NOTES:	NOT COMPLETED				
A									
В									
С									
D									
E									
F									
G									
Н									

Has the student completed the work outlined above and received verification from teachers: YES or NO								
Assistant Pi	rincipal:		_Date(s) recovered:					