

FAIRLAWN HIGH SCHOOL STUDENT VACATION APPLICATION

Student Name: _____ Grade: _____

Application Date: _____ Vacation Location: _____
Month Day Year City, State

First Day of Absence from School: _____ Date of Return to School: _____
Month Day Year Month Day Year

Number of Days You Will Miss: _____

Period	Assignment	Present Grade Average	# Days Absent To Date	Teacher Approval

Principal Signature _____ Parent Signature _____

The pupil will have the same number of days as he or she is absent in which to complete all school work.

POLICY ON VACATION ABSENCES

1. Vacation must be with the parents.
2. The completed Vacation Application Form must be presented to the assistant principal at least one (1) week prior to the actual time away.
3. A maximum number of five (5) days a year is allowed for vacation.