



Bethlehem Christian Academy

Principal's Prior Permission Absence Request Form

This form must be submitted at least 10 days prior to the date of absence.

Student: _____

Grade: _____

Date(s) of Absence(s): _____

Reason for Absence (use back of form if additional space is needed)

Parent Signature _____

Date _____

Email address: _____

Cell Phone: _____

Student's Current Schedule/List Teacher's Name

For Principal Use Only

Approved YES NO

Principal's Signature: _____ Date: _____

Place in student's cumulative folder