JH/HS Finals Test Date Exception Request (Board Policy Code No. 603.11, Secondary Finals)

This form must be completed and submitted to the JH/HS Principal 30 days prior to the testing date.

Student Name:			Grade	:
Student will be absent on the following date:	s:			
Reason for absence:				
Before completing the request, please read	through the foll	owing and sign	below:	
 Students must complete finals prior to a students to use when coordinating date Student attendance will be taken into coallowed per semester? Student academic performance will be the Probation? 	s/times with teac	hers. pproval. Are they	within or under the 10 a	absences per class period
Parent/Guardian Signature:				Date:
Student Signature (high school only):				Date:
This finals exemption was approved:	Yes	No	If no, reason:	
Principal Signature:				Date:

If approved, take this finals planning form to each class and coordinate an alternate testing date/time with the teacher. Return to the office before you leave for the planned absence.

Class Period	Alternate Testing Date/Time	Teacher Signature When Final Completed
1		
2		
3		
4		
5		
6		
7		
8		