Greenville City Schools

Vacation / Miscellaneous Absence Request

This form must be completed and returned to the school principal prior to the start of the vacation date requested. (A separate form must be completed for each child)

Conditions for approval:

1. Limited to five (5) school days during one school year. Approval of additional vacation days will be at the discretion of the Superintendent.
2. Students/Parents are encouraged not to request vacation days beyond the five (5) day limit as attendance is vital to educational success.
3. Assignments are to be completed and turned in according to Board of Education attendance policy.
4. Students/Parents are encouraged not to request vacation days during regularly scheduled exams, Ohio mandated achievement/graduation tests, and state stipulated count weeks.
5. High School ONLY: Teacher and Administrator acknowledgement section must be completed.

_____ _____ _____

Name of Student **Grade** **Building**

List other children attending Greenville Schools who are submitting a vacation request form. (Separate forms must be turned in for each child)

_____ _____ _____

Name of Student Grade Building

_____ _____ _____

Name of Student Grade Building

_____ _____

Name of Parent/Guardian **Phone**

_____

Address **City** **Zip**

Date of Vacation: _____

Indicate education advantage of vacation (activities, sites to visit, etc.)

_____

_____

Explain reason(s) at this time (why not during regular calendar vacation?).

_____

_____

_____ _____

Signature of Parent/Guardian **Date**

HIGH SCHOOL STUDENTS ONLY – TEACHER ACKNOWLEDGEMENT

(Please initial by period)

Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7	Period 8	Period 9	Period 10

____ Recommend Approval ____Does not meet guidelines _____ Approved _____Disapproved

_____ _____

Building Principal Date Superintendent Date

JED-E: Revision date: April 20, 2017