

## Fairview School

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## **Extended Absence**

At Fairview School, it is our responsibility to ensure families understand the effect that extended absences may have on a student's education.

Student's Name:	Date of Birth:
Grade:	Classroom:
Reason for Extended Absence:	
Last day in attendance:	
Expected date of return to school:	
I have read and understood the follow	ring with regard to my child's extended absence
<ul> <li>between attendance and effer</li> <li>The Education Act excuses so other unavoidable cause, religion permission from the Board. A recorded as an unexcused at This absence may affect my considered to possible the second solution.</li> <li>Schools are not mandated to possible to review the significant gaps in my child's light and the second solution.</li> </ul>	tudents from attending school due to illness or gious holidays, suspension/expulsion, or n absence outside of these exemptions will be osence. child's academic progress at school. crovide schoolwork for the extended absence. w and support my child's learning iple extended school absences could result in learning and achievement. child's peer relationships at school.
1	
2.	
3	
By signing below, I am indicating that implications this extended absence m	I have read and understood the possible aay have on my child's learning.
Name of Parent/Guardian	Signature of Parent/Guardian
Date	Phone Number