



NEWMARKET HIGH SCHOOL

505 Pickering Cres.
Newmarket, Ontario
L3Y 8H1

Tel: 905.895.5159
Fax: 905.895.5726

LETTER OF INTENT FOR AN EXTENDED ABSENCE

Periodically, there are occasions when parents or guardians need to withdraw their child from school for three or more days. It is important to note that extended absences affect students' achievement, as they miss out on valuable instructional time. Additionally, assignments and tests occur at regular intervals throughout the semester. If tests or assignment due dates will be missed because of this absence, prior arrangements must be made with the teacher for earlier completion and/or completion upon the student's return. Ideally, it is recommended that families avoid withdrawing students, if at all possible.

When an absence is necessary, we ask students to discuss it as soon as possible with their teachers, in order to keep up with scheduled class work and assignments. Daily lessons are designed to meet the needs of the class, and therefore, a teacher cannot always predict the specific progress within a unit of study. For this reason, it is advised that the student arrange for a "buddy" in each class to collect handouts and share other lesson notes upon the student's return.

Please note that a week's absence is equivalent to 20 classes, or 25 hours of missed instructional time.

This form outlines the procedure to follow for an extended absence. Please complete the reverse side of this form and have it signed accordingly.

These steps are to be completed **one week prior** to the anticipated absence:

1. **Student** completes time period and reason for absence;
2. **Teachers** of each course indicate the work for which the student will be responsible;
3. **Parent/Guardian** signs and dates completed form;
4. **Administrator** signs and dates the form, which is then filed in the Main Office.

Student's Name: _____

Student's Signature: _____

My extended absence from school will be from:

_____ to _____
DAY MONTH YEAR DAY MONTH YEAR

The reason for this absence is:

TEACHERS' ACKNOWLEDGEMENT OF STUDENT'S ABSENCE AND RESPONSIBILITIES:

Teacher's Name & Course	Current Mark	Teacher: Please indicate work to be completed by return date
Teacher: _____		_____
Course: _____	_____	_____
Teacher: _____		_____
Course: _____	_____	_____
Teacher: _____		_____
Course: _____	_____	_____
Teacher: _____		_____
Course: _____	_____	_____

My signature indicates that I have read and understood the contents of the letter and the teachers' comments:

Parent/Guardian Signature Date

THE COMPLETED FORM IS TO BE SUBMITTED TO THE MAIN OFFICE ONE WEEK BEFORE THE EXTENDED ABSENCE

Principal/Vice Principal Signature Date