

# PINE CREEK HIGH SCHOOL

## Partial Absence Parent Approval Form

Name: \_\_\_\_\_ Class of \_\_\_\_\_

**SY 25-26**

Approved for the following Period(s)

**Semester 1**

- Blue 1       Green 1
- Blue 2       Green 2
- Blue 3       Green 3
- Blue 4       Green 4

**Semester 2**

- Blue 1       Green 1
- Blue 2       Green 2
- Blue 3       Green 3
- Blue 4       Green 4

### CONDITIONS FOR PARTIAL ABSENCE

| Acknowledgments |  |
|-----------------|--|
| Parent/Guardian | Student  |
|                 | Student must verify, via transcript, that he/she is on track to meet graduation requirements.  |
|                 | 9 <sup>th</sup> -11 <sup>th</sup> grade students are permitted one (1) partial per semester.<br>12 <sup>th</sup> grade students who are on track to graduate are permitted no more than two (2) partials per semester.   |
|                 | Students are responsible for knowing any schedule adjustments due delays, snow make-up days and any other misc. daily schedule change and must other classes as scheduled.   |
|                 | Student must provide his/her own transportation to and from school.  |
|                 | Student must be <b>off campus</b> during the partial absence period.   |
|                 | Student must be enrolled in a minimum of five credits for participation in athletics and activities.   |
|                 | Partial Absence carries NO CREDIT and does NOT count towards graduation or athletic eligibility.   |
|                 | D20, PCHS, its administration and staff will NOT be responsible for a student's safety or well-being during the time of the partial absence.   |
|                 | Approval of partial absence is solely at the discretion of Pine Creek High School administration.  |
|                 | Parents and students assume all risks associated with partial absence, including District 20 graduation requirements, NCAA eligibility, and post-secondary education admission requirements and unsupervised time while not attending a regularly scheduled class. |

I understand and agree to the above conditions:

Student Signature \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Counselor/Administrator Approval**

The Partial Absence is approved, and I have verified student has the appropriate credits to support a Partial Absence.

Counselor/Administrator \_\_\_\_\_ Date \_\_\_\_\_

***Return this completed form to your grade level counselor.***