

Herbert J. Saunders Middle School

13557 Spriggs Road • Manassas, VA 20112
703.670.9188 • FAX 703.670.3078 • www.pwcs.edu/Saunders
Myca Gray, Principal

TO: Parent(s)/Guardian(s)
FROM: Myca Gray, Principal
DATE: _____
RE: **PRE-ARRANGED ABSENCES FOR:** _____ **GRADE:** _____

You have requested that your son/daughter, be excused from school on _____ **through** _____ for an out-of-town trip. We encourage families to schedule out-of-town trips during school holidays, not during school hours. However, I will excuse _____ school days with the understanding that **the burden for making up class instruction and class assignments will rest with your child and your family**, not with Saunders Middle School.

If your child accumulates any additional absences in any of his/her classes during the grading period, he/she risks failing that class based on attendance. Specifically, (absences) _____ **through** _____ will be excused; while (absences) _____ will be unexcused.

Teachers are under no obligation to prepare make up work prior to your out-of-town trip; they may provide that information at their discretion for the _____ **excused dates**. Once you return, teachers will provide him/her with a list of missed assignments and due dates determined by the teachers. Teachers are under no obligation to provide classroom instruction to students outside of regular classroom hours. Therefore, it may be necessary for you to hire a tutor at your own expense to assist your child in making up the assignments and instruction he/she will miss due to your out-of-town trip.

Furthermore, although _____ days of these absences will be marked excused, you must fully understand that _____ days of absence from class may seriously affect a student's ability to do well on assignments and exams. Saunders Middle School cannot be held responsible for ensuring that your teen will acquire the knowledge and skills outlined in the Prince William County curriculum and the state of Virginia's Standards of Learning, if your family chooses to remove him/her from classroom instruction.

Please indicate the reason for the absence: _____

Parent Signature: _____

ASSISTANT PRINCIPAL

Approved: _____ Date _____ Disapproved: _____ Date _____

Teacher acknowledgement:

1 st	2 nd	3 rd	4 th	5 th	6 th	7 th
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Please note that fifteen consecutive absences will result in any student being dis-enrolled and will require a re-entry appointment with the registrar according to Virginia state regulations.



Prince William County

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