



EXTENDED LEAVE OF ABSENCE

You have informed us that your child _____ in Grade _____ Div. _____ will have an extended absence starting from _____ to _____ Their first day back to school will be _____, and the total number of **school** days that they will be absent are _____ days.

If you find you will be returning on a different date, please contact the school at 604-668-6440 or currie@sd38.bc.ca

If your child is absent from the school for **longer** than twenty school days:

1. Your child will be removed from the school register, and you will need to re-register upon your return to Richmond.
2. Your child will only be accepted at General Currie School if there is available space at the time of re-registration.
3. If there is space: your child may not be able to return to the same homeroom/classroom if the class has reached its class limit during your child's absence.

Please be advised that the classroom teacher is not responsible for providing schoolwork for your child during your absence. We will be happy to see what your child has accomplished upon his or her return, but we will not be evaluating or marking these activities. Once you have exercised the privilege of taking your child out of school due to family circumstances, you must also accept the responsibility of your child's education during that absence.

Please complete and return the information slip below prior to your departure

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EXTENDED LEAVE OF ABSENCE

Student's Name: _____ Grade: _____ Div. _____

Extended Absence Period: _____ to _____.

Their first day back to school will be _____, and the total number of **school** days that they will be absent are _____ days.

Local Contact Name: _____ Phone: _____

Parent Signature

Date