



**BELTON HIGH SCHOOL
REQUEST FOR ATTENDANCE WAIVER**

All information, including social security number, must be provided. Each request must include the specific date, the reason for the absence, and appropriate supporting documentation with signature. This form and all supporting documentation must accompany the Request for Tuition Benefits at the time of submission. **THIS FORM MUST BE SUBMITTED WITHIN 15 DAYS OF DAYS IN QUESTION.** If the form is not received in the A+ office in this time period waiver may not be granted.

LAST NAME: _____ **FIRST NAME:** _____

GRADE: _____ **DATE:** _____

Reason for absence

Documentation Required

- Hospitalization
- Chronic health problems
- Court Appearance
- Funeral
- Religious Holiday
- Personal/family calamity
- Catastrophic illness/injury

- Physician's letter
- Physician's letter
- Court letter
- Obituary or Memorial.
- Minister's letter
- Parent and counselor's or Principal letter
- Principal's/Physician letter

SPECIFIC DATE(S)

REASON FOR ABSENCE

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

ATTACH REQUIRED SUPPORTING DOCUMENTATION

FOR A+ OFFICE USE ONLY:
DATE FILED: _____
ACTION TAKEN: _____
INITIALS: _____