

**EXEMPTION FOR STUDENT ABSENCES IN EXCESS OF TEN DAYS
PER YEAR**

The following form is suggested for use by students requesting an exemption from Policy IDE. The form is to be submitted to the principal. The principal will, in turn, make a recommendation to the Superintendent.

To: _____
(Principal's Name)

(School)

I hereby request consideration for special exemption from Policy IDE in order that I may participate in

I expect to be absent from my classes for _____ days beyond the 10 days granted under Policy IDE.

(Date)

(Student's Signature)

(Date)

(Signature, Parent or Guardian)

(Date)

(Teacher Sponsoring Activity)

Recommendation of the Principal

Based on the student's academic status and overall attendance, as well as the nature of the activity, I recommend that _____ be considered for participation in the activity listed above.

Signature of Principal _____

Date: _____

ISSUED: 09/11/2000

DEKALB COUNTY BOARD OF EDUCATION