

SUSSEX COUNTY VOCATIONAL TECHNICAL SCHOOL DISTRICT P.O. Box 351, Georgetown, DE 19947 Attendance Office 302-854-2817

FAMILY TRIP REQUEST FORM

PERSONAL	DATA			
Name			Grade	
Phone		Email		
TRIP INFOI	RMATION			
Destination		Number of Schoo	_Number of School Days to be Absent	
Date Leaving (First Day Absent)		Date Returning (Last Day Absent)		
Period	Course	Teacher's Initials and Date	Current Average and Comments	
1				
2				
3				
4 5				
6				
7				
8				
Ŭ			1	

Student Signature	Date
Parent/Guardian Signature	Date

This form is to be used for informational and documentation purposes only by the Sussex County Vocational Technical School District and in no way condones nor promotes non-school related trips during dates when school is in session. These absences will be coded as **APN** (Approved Parent Note). However, when your approved parent/guardian notes exceed ten days these days will be coded as **AU** (Absent Unexcused). Please refer to the attendance policy found in the Student Handbook for further clarification.