

WHITEHALL -COPLAY SCHOOL DISTRICT

Family Emergency Leave Form

Student Name: _____ Grade: _____

Parent/Guardian Name: _____

Period 1 Teacher: _____ Vo-Tech Notified: _____ Yes _____ No _____

Date(s) of Absences: _____ to _____
Month/Day/Year

Month/Day/Year

Number of School Days to be Missed: _____ Date of Request: _____

Previous Requested for Educational Trips: (current school year) _____

SCHOOL DISTRICT POLICY

- Emergency leaves are limited to 7 school days per year. Any days missed for travel beyond the 7 days absence will be illegal days if the student's age is 16 or younger and unexcused days if the student is 17 or older.
- If the student is found to be truant, family emergency leave requests will not be honored.
- All work missed must be completed by the student within 5 days upon returning to school.
- The student is responsible for contacting the teacher to request school work and for satisfactorily completing all work missed during his/her absence.
- This form must be submitted to the office at least 10 days prior to departure, if possible. If the form is not submitted prior to the trip, the days will be considered illegal until the form is returned and approved by administration.

*****WCSD is following the governor's state quarantine recommendations regarding travel outside of PA. If your trip is outside of PA, a school employee will call you to explain the current guidelines.*****

Parent/Guardian must complete the following questions:

What is the reason for the family emergency leave? _____

Parent Signature: _____ Date: _____

(This section for office use only)

Authorization: _____ Yes _____ No

Principal Signature: _____ Date: _____