

Parent/Guardian Phone:

ATTENDANCE LOSS OF CREDIT—APPEAL APPLICATION FORM SCHOOL YEAR 2022-2023

(Note: This form is submitted only when a student has officially lost credit in a course.)

tudent Name:			Campus Name:			Date:		
students are required re than 10% of the day e parent/student belie eal a loss of credit to dent has excessive ab arse credit.	ys that class is in seves that these ab your Campus Atte	session will no sences were endance Com	ot receive cre due to exten mittee within	edit for the co uating circun ten (10) sch	ourse." nstances, the pare ool days from cam	ent/student si	hall have the	e right to er, if you
ep 1: Complete the At nool days after receip lege visit, etc.) must b	t of the loss of cre							
Course	Teacher	Period #	Type of Course (Select One)		# of Absences	School Administrators Complete Only Seniors Only Is this needed for graduation?		
			Full Year	Semester		Course	Credit	Both
UDENT/PARENT/G	UARDIAN:							
tudent Name: Signature:						Date:		
arent/Guardian Name:		Signature:			 Date:			