



HAMILTON SCHOOL DISTRICT  
Sussex, WI

FAMILY VACATION REQUEST

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date: \_\_\_\_\_

School attendance contributes to academic success. Parents/guardians should understand that school absences could affect the student’s academic progress. Family vacations should be taken whenever possible when school is not in session. Where circumstances require that a student miss school for a family vacation, the parent/guardian must notify the school prior to the absence and complete this form in order for the absence to be excused. Failure to make up the work missed may result in no credit for coursework missed or due on the day of an absence. A student may be excused by the parent/guardian for not more than ten (10) days in the school year. (Board Policy 431, Compulsory Student Attendance.)

Dates Requested: \_\_\_\_\_

Destination Location: \_\_\_\_\_

I have reviewed the paragraph above and understand the importance of attendance to learning.

Parent/Guardian Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Parent/Guardian phone number: \_\_\_\_\_

Administrative Signature: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Teacher Signature: _____	Comment _____
Teacher Signature: _____	Comment _____
Teacher Signature: _____	Comment _____
Teacher Signature: _____	Comment _____
Teacher Signature: _____	Comment _____
Teacher Signature: _____	Comment _____
Teacher Signature: _____	Comment _____

Please return form to the school office one week prior to the absence.

Copies: School Office, Parent(s)

APPROVED: September 5, 1989	REVISED: October 3, 2006
REVISED: January 3, 1990	May 1, 2007
February 5, 1991	REVIEWED: June 20, 2016
REVIEWED: January 8, 2002	REVISED: March 1, 2022
REVISED: July 18, 2022	