

South Jordan Elementary



Home of the Rams
Ken Westwood, Principal



11205 South Black Cherry Way
South Jordan, Utah 84095

Phone (801)254-8000
Fax (801)302-4960

STUDENT EDUCATIONAL LEAVE (Turn in at the office)

Teacher _____ Track _____ Grade _____

_____ is applying for Educational Leave starting on
(Student name)

_____ through and including _____
(date) (date)

Parents:

- Educational leave is granted for a **minimum of 2 days and a maximum of 10 days during a school year**
- This application form must be completed **before** the absence
- Student will be marked unexcused absent until assigned work is returned
- ***All assigned work due within 5 school days of students return***
- Educational Leave days count as absences at end of year and for attendance on Rocky Ram awards

I have read, understood and will abide by the above policy.

Parent Signature _____

Office has entered G-OT(guardian out of town) on Skyward _____

Teachers:

- Please provide assignments as necessary prior to student leaving
- **Return this form to the office within 5 days**
- Mark the correct box below
 Student **Completed** work Student **Did Not** complete work

Teacher Signature _____

Office has entered the appropriate code in Skyward _____