BONNERS FERRY HIGH SCHOOL PARENT REQUEST FOR RELEASED ABSENCE

As the parent/gu	ardian of, I
request that Bonr	(name of student) ners Ferry High School release this student from school
(date or time	to I will assume full (date or time)
	during the period (name of student)
of this request an	d do hereby release Bonners Ferry High School of any and all liability
which may arise o	as a result of activities engaged in by(name of student)
while absent from	the school campus. The responsibility for making up school work
missed during the	released absence rests entirely upon the student.
Reason for absen	ce
Signature	of student
Signature	of parent/guardian
Date	
Period Class	Teacher's Signature Y/N(makeup) Comments
5	
6	
	(Signature of School Official)