

Request for absence from School

1. Request

Surname, First name of Pupil		Date of birth	Class
Surname, First name of Parent(s) or Guardian			
Address of Parent(s) or Guardian			
<p>I/We request for the above named pupil</p> <p><input type="checkbox"/> absence for one day on _____ in accordance with § 39 MSO.</p> <p><input type="checkbox"/> absence from the period of _____ until _____ in accordance with § 39 MSO.</p>			
Reason			

Place, Date		Signature of Parent(s) or Guardian	

2. Decision of the Headmaster

<input type="checkbox"/> The request is approved.	
<input type="checkbox"/> The request is approved with the following conditions: Your child will be required to complete the missed schoolwork within <u>one week</u> by attending the afterschool group at the school premises. We would request you to contact your child's teacher immediately to arrange this.	
<input type="checkbox"/> The request is not approved for the following reason(s): _____ _____ _____	
Place, Date	School stamp
Oberammergau,	
Headmaster	

3. a. Original to be kept by Parent(s) or Guardian

b. Copy for school records