



Central Academy of Technology & Arts  
Kevin Beals, Principal  
600 Brewer Drive  
Monroe, NC 28112  
Phone 704.296.3088  
Fax 704.296.3090  
http://cata.ucps.k12.nc.us

## Request of Absence for Valid Educational Opportunity

\*To request an absence to attend or participate in an educational activity, please complete this application form and return it to your counselor and grade level administrator at least 10 days prior to the absence. The major intent of the activity must be educational in order for the student to be granted this type of absence. The proposed activity must have significant educational value and be composed of an intensive program related to the core curriculum. The grade level administrator and counselor will use good judgment to determine if the activity meets guidelines. Students that are approved by the Administration will be expected to make up all school work. This type of absence cannot occur during the school's state assessment, Districtwide assessments or during finals week, unless there are extenuating circumstances that are approved by the Administration. Please note that family trips will not be excused for an educational opportunity. Even though students will have unexcused absences for the trip, they will not be asked to recover the time missed for the trip if they maintain good grades and turn in all of their missed work. Email this completed form to Mr. Smith (Data Manager). Mr. Smith will consult with the Principal for final approval.

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Academy: \_\_\_\_\_

Residence Address: \_\_\_\_\_

Date Submitted: \_\_\_\_\_ Dates of trip: \_\_\_\_\_

Student will share presentation with (specify teacher, class, counselor or administrator) \_\_\_\_\_

Please explain the nature of the event the student will be attending and how the activity meets the criteria of (1) having an educational purpose, (2) having significant educational value, and (3) how the activity is directly related to one of the common core state standards. Use additional paper, if needed, and attach to this completed form.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*NOTE: If this request is approved, the student is required to make a presentation to a class, administrator, or counselor about the educational opportunities provided by this trip. The project is due to the designated person ONE WEEK from the date of return. It is the student's responsibility to request any make-up work from all teachers. Teachers are not required to provide work to the student in advance of the absence.

Signature of Student \_\_\_\_\_ Signature of Parent \_\_\_\_\_ Date \_\_\_\_\_

Growing Possibilities...

