Attendance Appeals Form

Please submit the completed form to the Student Affairs office (room 1003) within two weeks of a loss of credit notification. All sections must be complete in order to process appeal. Attach any supporting documentation, including medical notes.

Name/Grade:	
Date of Notification:	-
Date submitted:	-

Course Title: _____

Current Grade in Course: _____

Is this appeal form being completed for:

- □ Loss of credit due to unexcused absences
- □ Loss of credit due to both unexcused and excused absences
- Loss of credit due to only excused absences

List the dates of absences, reasons and any other further information.

X (Office use only)	Date of Absence	Excused/Unexcused	Reasons (doctor/illness/personal)

Are there any other details you would like the student affairs office to know about your student's absences?

Student's Signature

Parent(s) Signature/Phone #

Please note: if your appeal is granted, you will not be contacted.

Determination of MHS Administration:

D Appeal Granted

Dates marked with an "X" next to the date are exempted Additional considerations:

- Further unexcused absences will result in immediate loss of credit and no further appeals permitted
- **u** Further excused absences due to illness will require medical documentation
- □ No further absences/appeals permitted

Appeal Denied/Rationale