

TURTLE LAKE ELEMENTARY SCHOOL
TRAVEL PLANS FORM

Parent's Name _____

Students at Turtle Lake:

Name	Grade	Homeroom Teacher

We request approval of our child(ren)'s absence for family travel as described below.

Dates student(s) will be absent from school:

Destination/Travel Plans

Comments _____

Parent's signature _____

Date _____

Return this form to the Turtle Lake School office.

Please refer to page 2 of the Turtle Lake School Calendar & Handbook regarding homework.

Office Approval:

Approved by _____

Principal

Date _____

Original - office

Copy - classroom teacher

Copy - health office

Copy - parent