## **Absence Documentation Form**

STUDENT NAME:		TODAY'S DATE:	
PROGRAM:		INSTRUCTOR:	
I AM REQUE		XCUSED □ UNEXCUSED AI /DD/YY) FORHOURS	
Any student who (with	thout PRIOR arrangements may be dismissed from	through SCCC administration) misses five con the program. The "20% Rule" takes both excus	secutive days or exceeds 20% of the program hours per payment period ed and unexcused absences into consideration.
Excused abser Excu	used absences may only acc The school may	ıl, unforeseeable, and/or unavoidable circumstar	
		Attach documentation (r	equired)
	EXCUSED ABSE All unexcused absences mu		d must be pre-approved by the program instructor.
Make Up Date	Hours Made Up	Supervisor Signature & Date	Instructor Signature & Date
-	was completed: gnature required	☐ On campus ☐ Off campuif time was made up off campus	
FOR ALL AB	SENCES:		
REASON FOR	R ABSENCE:		
Student Signature		Date	-
OFFICE USE ONLY:    APPROVED		□ NOT APPROVED	TTL Excused Absences to Date
Attendance Officer		Date Received	Date Entered
Coordinator		Date Received	

Last updated: May 2022