

STUDENT ACTIVITY CONTRACT ABSENCE

Lake City High School
6101 Ramsey Rd.
Coeur d'Alene, ID 83815

NAME _____ GRADE _____

BPA Regional

ACTIVITY **Leadership Conference** ADVISOR **Keylon, Kerr & Menard**

DATE(S) YOU WILL BE ABSENT **Friday, December 13, 2019**

In order to miss school for this activity, you **MUST** be passing all classes. Please get your instructor's signature that you are passing and also the assignment(s) if possible. Return this form to your activity advisor by **Friday, December 6, 2019**

PER.	SUBJECT	P/F	TEACHER SIGNATURE	ASSIGNMENT
0				
B5				
B6				
B7				
B8				