

Educational Enhancement Request Form EHO8 Bath County High School

645 Chenault Drive Owingsville, Kentucky 40360 Phone 606-674-6325 / Fax 606-674-9188

To request an absence to attend or participate in an educational activity, please complete this application form and return it to your school principal at least five (5) days prior to the absence. Such an absence as requested by this signed application and approved by the school principal will be considered an excused 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 curriculum (e.g. art program, dance programs, State Fair activities, workshops that are educational in nature, college visits, etc.). The principal will use his/her good judgment to determine if the activity meets guidelines. A student may be approved for up to ten (10) days of absence per year for this purpose. Students who are granted an absence under this law will be allowed to make up all school work. Student grade can not be affected by lack of attendance or participation in classed for approved days. This type of absence can not occur during the school's fall or spring CATS testing window or during the first five (5) and last five (5) days of each semester. Decisions may be appealed to the Superintendent and then to the Board of Education

Student Information:			
Student Name:		Grade Level:	
Date of Birth	Age: H	Home Phone:	
Educational Enhancemen	t Information:		
Beginning Date:	_ End Date:	Total Days to Be Missed:	
Destination for Education	al Enhancement: _		
purpose, (2) having "significant educational value,) and (3) how the activity is directly related to one of the core curriculum subjects of English, science, Mathematics, social studies, foreign language or the arts. Please discuss in detail in the space provided below the events that will occur that will be educational in nature. Feel free to attach a schedule of activities/Events to be attended. Use the space provided below or the back of this form.			
Return this completed form			Date
High School Attendance Of days before the date o Educational Enha	f the requested	Signature of Parent/Guardian	Date
		Signature of Principal	Date
# of Excused Absences To Date: #of Unexcused Absences To Date:			
Must Be Completed by Scho	ool Attendance Staff	# of Total Absences to Date:	

