



5704 CR17 S.  
Sebring, FL 33875

Phone: 863.832.1006  
Fax: 863.473.8472

Email: [admissions@ibabears.com](mailto:admissions@ibabears.com)

# Independent Baptist Academy

## Student Absence Request Form

### To Be Completed by the Parent/Guardian

Full Name: \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
*Last First M.I.*

Please list the reason for the requested absence: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dates of absence: From \_\_\_\_\_ to \_\_\_\_\_

**\*Note** Absence Request Form should be submitted at least two-weeks prior to the absence dates.

**\*\*Approval of absence request** is dependent on the student's GPA and prior attendance record. If the request is denied, any absences during the requested period will fall under the standard attendance policy in the Student Handbook.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Office Use Only

Date request was received: \_\_\_\_\_

Approved

Denied – Due to \_\_\_\_\_  
\_\_\_\_\_

All assignments\* for the absence period must be submitted by \_\_\_\_\_.

\*Please see attached assignment list.

Office Signature: \_\_\_\_\_ Date: \_\_\_\_\_