1691 Grace Ave Lebanon, PA 17046 www.ourladyofthecross.org

717.500-6800

## PARENTS NOTIFICATION OF ABSENCE FROM SCHOOL FOR TRIP

**Directions:** Complete the following form and return it to the OLC Office *in advance* of the trip (preferably 10 days before trip). Please note that class and homework assignments must be made up upon return to school.

Name(s) of Students participating	ç in trip:		
1.		Grade:	Philippine and the second second and the second
2.		Grade:	
3.		Grade:	De Carlos Car
4.		Grade:	
Dates of absence:	to		
Date student(s) will return to sch	ool:		
Person(s) directly and/or supervis	ing student(s) during this absence:		
Name:			
Address:			
ITINERARY OF TRIP: Include e	xperiences which could be educational in n	ature and will, therefore, provide the	child with some
valuable experiences outside the class	room.		
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DATE:	PARENT SIGNATURE:		<u> </u>
	FOR SCHOOL USE OF	NLY	
Head of School Signature:		Date:	17-38
0			

Prior Requests: \_\_\_\_\_ Date: \_\_\_\_