

Preston County Schools 731 Preston Drive Kingwood, WV 26537

www.prestonboe.com

EDUCATIONAL LEAVE REQUEST

Student:		_ WVEIS#:	Date:
Grade:	Homeroom Te	acher:	
Dates of Leave:	Total # of School Days Missed:		
Destination of Leave:			
Learning Outcomes: (\	What will the student le	arn on this trip? In what lea	rning activities will the student be involved?
Parent Signature:	Date:		
For School Use Only Teacher(s): Teacher ir	nitials indicate reco	mmendation to building	principal for approval.
	(F	PK – 5 Classroom Teac	ner)
	<u>Mid</u>	ldle and High School	
Period 1	_	Period 4	Period 7
Period 2	_	Period 5	Period 8
Period 3	_	Period 6	Period 9
Teacher(s): Please inc	licate a reason if re	commendation for appi	roval is withheld.
	•	•	
	ing:		
For Central Office Use Only			
*Leaves of absence in exce Education and only after ap	-		ed by the Preston County Board of
□Approved □Not App	proved PCBOE	Signature:	
Date of Board Meeting:			

^{*}Students are required to make-up all work missed during their absence.

^{**}Educational Leave forms <u>must</u> be submitted <u>one month</u> in advance of request.