

Appeal Form

Student Name: _____ Grade: _____

Student Number: _____ Date: _____

Student Cell Number: _____

FYI:

- Medical appointments or illness absences or check-ins do not need to be appealed if a note from the doctor is submitted.
- Tardies should not be appealed

Reason / Request:

Name of Parent/Guardian _____ Cell phone _____

Parent/Guardian Authorization

E-mail or submit to Mrs. Louder (Attendance Office)
alouder@alpinedistrict.org