Livingston Public Schools

REQUEST FOR APPROVAL OF EXTRAORDINARY OPPORTUNITY

Student Name: ________________________________  School: ___________________  Grade: ______

This form is due **at least** 2 weeks before the requested date(s). Extraordinary Opportunities are educational opportunities that are closely tied to the student’s current course of study and may not be those whose duration unduly disrupts the continuity of student instruction.

Specific documentation, which includes dates/times and student name, must be presented with this form to support the requested absence in order for it to be considered.

Dates/Times of Activity: ______________________________________________________
___________________________________________________________________________

Class(es) to be missed: ____________________________
___________________________________________________________________________

Please describe the specific extraordinary opportunity:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

Please describe the educational relevance of this activity and how it pertains to the student’s curriculum:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

I understand that if my request is approved, all missed assignments will be my responsibility and it is not expected that my child’s teacher(s) will provide assignments in advance nor individual instruction for material presented during this absence.

Student Signature  Date    Parent Signature   Date

Approved: _____   Denied: _____    Not Recommended: _____
Reason: ________________________  Reason: ________________________

Principal Signature  Date   Superintendent/Designee Signature  Date