

# PLAINWELL HIGH SCHOOL

## Notice of Credit Loss/Application for Credit Restoration

Student \_\_\_\_\_ Grade \_\_\_\_\_ Date \_\_\_\_\_ Trimester \_\_\_\_\_

Dear Parent and Student:

This is to inform you that your credit is in jeopardy of being lost due to excessive absences. Your success at Plainwell High School is important to us, so please keep our office informed of any issues that are preventing you from attending school. If you believe that there are valid reasons for your absences or extenuating circumstances that need to be considered by administration, please explain these below and return this form with any supporting documents available (i.e. doctor's note, court subpoena, etc.) to the front office one week before the end of the trimester. Otherwise, please consider this your notification that you will not receive credit in the subject(s) listed.

Please list below the classes that you have 8 or more absences in. You are required to obtain a signature of the teacher in which you have 8 or more absences.

Hour	Class	Teacher	Teacher Signature	Number of absences	Grades (Tri/Exam/Final)

I believe I should earn credit in these classes because

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I have attached the following supporting documentation:

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Student Signature \_\_\_\_\_ Date \_\_\_\_\_

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

