



# BRYSON Independent School District

**Mr. David Stout, Superintendent**

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## BRYSON ISD PRE-ARRANGED ABSENCE FORM

**Student(s) name** \_\_\_\_\_

**Reason for absence** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Date(s) of absence** \_\_\_\_\_

**If you will not be absent all day, time you are leaving** \_\_\_\_\_

**Signature of parent or guardian** \_\_\_\_\_

**Date of parent signature** \_\_\_\_\_

**Signature of principal** \_\_\_\_\_

**Excused, Unexcused, or Other** (Principal will circle one)

**Date of principal signature** \_\_\_\_\_

**Principal comments:**