



Collège Pierre-Elliott-Trudeau

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Permission for Leaving

Part A REQUEST

_____ requests permission of the school to have
Parent/Guardian

_____ excused from the school on the following dates:
Name of Student

_____ to _____
Date Date

For the following reason(s):

- medical family trip educational tournament personal
- other _____

Part B GENERAL REQUIREMENTS

- My son/daughter is fully aware he/she is responsible for submitting all missed assignments, and for writing and completing all missed evaluations.
- My son/daughter is fully aware he/she is responsible for submitting all pre-assigned work before the leave of absence, unless otherwise directed by the teacher.
- My son/daughter is fully aware he/she is responsible for catching up on all missed work within 2 days of returning to school, unless otherwise directed by the teacher.
- My son/daughter is fully aware that formative assignments will be marked at the teachers' discretion.
- My son/daughter understands that the leave of absence affects attendance standing.



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Part C TEACHER COMMENTS

Course: _____

Teacher: _____

Signature: _____

Course: _____

Teacher: _____

Signature: _____

Course: _____

Teacher: _____

Signature: _____

Course: _____

Teacher: _____

Signature: _____

Course: _____

Teacher: _____

Signature: _____

Course: _____

Teacher: _____

Signature: _____

Course: _____

Teacher: _____

Signature: _____

Part D APPROVAL

The Student and Parent/Guardian are aware of all the general requirements.

Signature of Parent/Guardian

Date

Signature of Student

Date

Signature of Administration

Date