

K-3 / K-4
Vacation Notice

Child's Name: _____ **Date:** _____
Child's Teacher: _____ **Grade:** _____
Vacation Week: _____

Please be reminded that full-time students are allowed 2 weeks of vacation that they do not pay for per calendar year. Please fill out this slip ahead of time and give to your child's classroom teacher or the Business Office.

This form is only used in the preschool.



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