

**AP Testing 2017
Attendance Note**

PLEASE PRINT NEATLY

Student Name: _____

Student Number: _____ Grade Level: _____

Parent/Guardian Name: _____

Parent/Guardian Phone Number: _____
(Please list phone number where parent/guardian can be reached...all forms will be verified)

This is considered an UNEXCUSED absence.

My child has permission to leave after an AP exam for the following day(s):

Date	Initial All That Apply
Monday, May 1, 2017	
Tuesday, May 2, 2017	
Wednesday, May 3, 2017	
Thursday, May 4, 2017	
Friday, May 5, 2017	
Monday, May 8, 2017	
Tuesday, May 9, 2017	
Wednesday, May 10, 2017	
Thursday, May 11, 2017	
Friday, May 12, 2017	

***Students not attending school prior to an afternoon AP exam must check in through PPO before entering the afternoon exam room.**

Parent/Guardian Signature: _____ Date: _____

**Please return this form to PPO ASAP but no later than April 28, 2017.
Forms turned in the day of the exam will not be honored.**