



Student Services Division  
**Student Attendance Plan**

Date Student Attendance Plan Written: \_\_\_\_\_

Student Name (*First, Middle, Last Legal Name*): \_\_\_\_\_

Parent Name (*First, Middle, Last Legal Name*): \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Telephone/Parent Cell Phone: \_\_\_\_\_

Number of Absences (Excused, Unexcused, Total): \_\_\_\_\_ Number of Tardies: \_\_\_\_\_

Student Plan To Improve Attendance:

Parent Plan To Improve Student Attendance:

School and Community Services/Supports Offered To Improve Student Attendance (*e.g. School Attendance Review Board; family counseling; academic support/assistance*)

Student Signature: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Principal Designee Signature: \_\_\_\_\_

Other Signature: \_\_\_\_\_