

Alachua County Public Schools
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: _____