

RELEASE FOR ARMED SERVICES PROCESSING

_____ will be absent from school on _____,
for military testing/processing.

| | |
|--|----------------------------|
| _____ Parent/Guardian | _____ Date |
| _____ Career and Technical Instructor | _____ Current Grade |
| _____ Academic Instructor | _____ Current Grade |
| _____ Academic Instructor | _____ Current Grade |
| _____ Academic Instructor | _____ Current Grade |
| _____ Academic Instructor | _____ Current Grade |
| _____ Counselor | _____ Approval (Yes/No) |

Students must be passing all classes and have this form completed and signed by all of the above staff members prior to the absence in order for the Military Testing/Processing to be excused.

To be completed at time of testing/processing

_____ was absent from school for military testing/
processing on _____.

| | |
|--|-----------------------|
| _____ Armed Services Representative | _____ Phone Number |
|--|-----------------------|