Marion Local Schools

7956 State Route 119 - Maria Stein, Oh, 45860 – Phone: (419) 925-4294 – Fax: 925-0212

MICHAEL L. POHLMAN
Superintendent

AMY REINEKE
Treasurer

Vacation Leave
Parent Application Form

1,_____ do hereby request for my son/daughter
(name of parent)

_____ to be on vacation with me
(name of child or children)

(or my spouse) from _____ to _____

During the time that my child is out of school, I agree to accept full responsibility for his/her welfare, and I agree to hold harmless the Marion Local School Board and all its employees, relieving them of any and all injuries and claims which may result during the time which my child is absent from school (as indicated by the dates above). I understand that this request for vacation is subject to the approval of the building principal, and I agree to encourage my child to seek and complete all work missed while on vacation with me.

_____ _____
Signature of Parent Date

Please Note:

1. Vacation with parent is not an excusable absence unless signature of building principal is affixed.
2. A minimum of one week's advance notice of the impending vacation day or days is requested by the school.
3. Failure to return this completed form to the building principal prior to the absence will result in such days construed "unexcused," carrying with this infraction all rules and penalties applicable to truancy.

Reviewed and approved:

_____ _____
Signature of Building Principal Date

Wisdom * Integrity * Service

TIM GOODWIN
High School Principal

MICHELLE MESCHER
Technology Director

NICK WILKER
K-8 Principal

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