

ALANSON PUBLIC SCHOOLS

7400 NORTH STREET, ALANSON, MI 49706
CENTRAL OFFICE FAX: (231) 548-2132

TELEPHONE: (231) 548-2261
K-12 OFFICE FAX: (231) 548-2165

Date _____

ATTENDANCE CONTRACT - 18 YEAR OLD STUDENTS

I, _____, am 18 years of age or older and wish to take responsibility for my own attendance record. I will follow the policy and will excuse my absences within the time limit (2 days). I understand that I must meet time deadlines or I will be charged with an unexcused absence. If I exceed 3 unexcused absences in any class, I know that my credit will be removed and I may apply to the principal to have it reinstated.

I have read and understand the Alanson High Schools attendance policy.

I understand that while I am living with my parents and they are providing for my support they have rights to information about my performance and records at school.

Please check:

- Living with parent or guardian
- Living on own, not with parent or guardian

Student Signature

Principal Signature

Parent/Guardian Signature

Parent/Guardian Signature

Student Birthdate