

EL CAMINO REAL HIGH SCHOOL

EARLY LEAVE FORM

(EARLY LEAVES ***MUST BE VERIFIED*** BY PARENT OR LEGAL GUARDIAN)

TIME OF EARLY LEAVE _____

_____/_____/_____
STUDENT'S DATE OF BIRTH

PARENT'S DAY TIME PHONE #

STUDENT'S LAST NAME

STUDENT'S FIRST NAME

DATE OF EARLY LEAVE

PERIODS MISSING 0 1 2 3 4 5 6

CIRCLE ONE: 1) MEDICAL APPOINTMENT 2) PERSONAL BUSINESS 5) COURT/ RELIGIOUS HOLIDAY

REASON FOR EARLY LEAVE

PARENT SIGNATURE